Preventative Mental Health Services for Young Children in Alameda County

An Action Plan to Meet the Urgent Needs of Children, Caregivers, and Families

An Alameda County Child Care Planning Council Report
Prepared by Angie Garling, Mingyew Leung and Rachel Cleary

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Acknowledgements

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Alameda County Early Childhood Mental Health Systems Development Group 2002

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Executive Summary

Thousands of Alameda County’s families are experiencing stressful situations and crises every day. Poverty, violence and illness threaten the vitality of our communities. No population is more vulnerable to our society’s afflictions than children. The Little Hoover Commission reports that “more than 1 million children in California will experience an emotional or behavioral disorder this year, and more than 600,000 of them will not receive adequate treatment.”1 In particular, our youngest children from birth to age five are the most at risk because their social-emotional development and attachments are just beginning. Lack of intervention at this age could significantly impair a young child’s chances for success in school and in later life. Fortunately, this same age group is also the most likely to respond to prevention and early intervention.

The caregivers of these young children, including parents and child care providers, have repeatedly voiced their concern regarding the lack of adequate resources to meet the mental health needs of children in child care and early education settings. Caregivers feel that they do not have the appropriate training, tools and available time to identify and address the increasing needs of the children in their care. This report, conducted by the Alameda County Child Care Planning Council, attempts to portray the depth and severity of these needs and makes recommendations to improve the situation for our County’s youngest children.

Although the majority of this report focuses on the unmet needs of children with serious behavioral and developmental challenges, we recognize the critical role that a quality child care setting plays in the lives of ALL children and families. Consistent, responsive caregiving that recognizes and nurtures a child’s social and emotional development is a powerful yet underappreciated prevention tool. Open communication between parents and providers is another essential component to a child’s success in child care. We feel that attention needs to be paid to the social and emotional needs of all children, not just those in child care with an identified special need.

Several findings in this report substantiate the need for more attention and resources to provide quality mental health services for children in child care. Our survey data indicate that children with acute mental health and other special needs ranges from 13% in center-based child care to 25% percent in family child care. However, the lack of ongoing training, support, and consultation for caregivers and available consultative support to child care providers are of the greatest concern. In addition, language and cultural differences, lack of mental health providers with expertise in child care settings and the overall limited availability of mental health services also prevent many families and child care providers from accessing needed services.

Based on the insights gained from surveys with family child care providers, child care center directors, and mental health providers, we have developed the following recommendations to better serve children with mental health and/or other special needs. They consist of pivotal steps to improve and expand existing services to ALL children and their families, as well as to enhance the capacity of child care and mental health providers to address an unmet, critical need. The recommendations are to:

1. Increase the number of child care centers that receive on-site mental health consultation by an additional 20 programs per year. Estimated cost: $160,000 per year

2. Increase the availability of training resources to enable child care providers to identify children with developmental delay or other behavioral health issues. Estimated cost: $75,000 per year

3. Provide child care staff with additional training and ongoing educational opportunities to promote cultural competency and improve the recruitment and retention of staff with such skills. Estimated cost: $75,000 per year

4. Ensure that every community college early childhood education course includes information on the connection between emotional and cognitive growth in children and places value on the relationships between caregivers, children and parents.

5. Increase the number of licensed mental health clinicians available to provide child care consultation, infant mental health and early childhood mental health services in Alameda County. Estimated cost: $160,000 per year

6. Ensure that all professional mental health training institutions include a component on early childhood education programs and places value on the relationships between caregivers, children and parents.

7. Implement and fund a study to:
   - explore the correlation between suspensions from child care and the availability of child care mental health consultation;
   - develop and coordinate a set of guidelines or standards, such as best practices, for child care mental health services;
   - conduct a follow-up survey to assess child care providers’ perceptions about their ability to serve children with behavioral health or development delay conditions. Estimated cost: $45,000

By implementing these recommendations, more of our County’s children and families will flourish in their current child care settings, and will be better equipped to enter school ready to learn.
Introduction/Background

The overall well-being of young children has been a recent focus of public services and educational policy. Policymakers, researchers and practitioners, with support and urging from the public, have begun to prioritize the issue of young children's optimal development. This attention has focused on their lives at home, as well as in school, child care and the community. More recently, research highlighting the importance of the early years on children's development has led to an increased focus on the quality of care settings for infants, toddlers and preschoolers. In addition, the U.S. Surgeon General's 1999 report on mental health garnered additional attention, especially regarding the stigma of mental health and the lack of services in communities of color.

The Importance of Child Care Mental Health Services

Children in child care settings who have mental health needs or special needs, such as developmental delay, are of great concern to parents and child care providers. If their specific mental health and developmental needs are not identified or addressed, these children will likely have limited opportunities to develop appropriately in social-emotional and cognitive arenas. For instance, a child who has emotional issues that go untreated will not gain a sense of safety or appropriate boundaries and thus, may not explore new surroundings or form attachments with new caregivers. Another key concern is that children with untreated mental health or special needs will have a diminished ability to enter and succeed in school. If such needs are not identified and managed or treated, the child will likely be exposed to unnecessary suffering from a related disease, disability or disorder. Moreover, any ensuing response will require more intensive and more costly treatment or intervention later in life.

In child care settings, everyone is affected when a child's special needs or mental health needs do not receive an appropriate response. Children with challenging behaviors create additional responsibilities for caregivers who may not have adequate support or training. This situation is compounded because most caregivers must also tend to the needs of several children simultaneously. Other children struggle with how to respond to a classmate who is acting inappropriately, or they may

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experience inconsistent attention from their adult caregivers whose attention is focused on a few children who display the most pressing demands. Finally, parents and other family members may lose time at work to attend to their child’s care situation.

The Early Childhood Mental Health Systems Development Group

In response to requests from the child care community to develop and identify resources for children’s mental health services, a group of individuals began meeting on a regular basis in early 2000. The group, now known as the Early Childhood Mental Health Systems Development Group, is a subcommittee of the Alameda County Child Care Planning Council. Its mission is to advocate for, develop and facilitate the implementation of a community-based, county-wide system of preventive mental health and treatment services for all young children (prenatal to age five) and their families within the home, child care and the community. The Group, which merged with the Infant Family Mental Health Interest Group last year, consists of child care providers, various early childhood and child care mental health providers and other interested individuals.

The Group conceptualized this research project, this report and the accompanying directory. It secured funding from the Alameda County Social Services Agency, which was supplemented by support from the Alameda County Behavioral Health Care Services Agency and the Alameda County Child Care Planning Council.

Purpose of this Document

The Early Childhood Mental Health Systems Development Group embarked on this study to begin to address several gaps in both information and services. In Alameda County, the span of early childhood mental health and child care mental health resources has not been previously documented or collected. Similarly, the status of children in child care with developmental and mental health needs has not been clearly established.

This document accomplishes two objectives. First, it documents child care providers’ perceptions of mental health issues in child care. Second, it lists organizations, public agencies and mental health providers that can provide technical assistance, training and consultation to child care programs and directly to children ages birth to five.
Methodology

The Importance of Caregiver and Provider Perceptions

The goal of this project was to illuminate the mental health issues of children in child care through the eyes of child care and mental health providers. We believe that the perceptions of providers may be as valid as an official, standardized definition of special needs and/or mental health issues. Caregivers spend many hours each day with these children and have developed significant relationships with them. Moreover, the perspectives of child care providers have a direct impact on how a child may receive appropriate treatment or referrals. Therefore, we documented caregiver concerns as a first step to understanding this unmet need. The resulting insights and recommendations then seek to directly improve how the needs of children, caregivers and families are met.

Definition of Special Needs

“Special needs” is a term that captures a broad range of conditions and issues. For example, the Department of Education’s definition includes 14 “handicapping conditions” including blindness and serious emotional disturbance. California’s Department of Developmental Services recognizes four definitions of special needs, or developmental disability, including cerebral palsy, autism, epilepsy and mental retardation. Also included are disabling conditions closely related to mental retardation or requiring similar treatment.

We recognize the myriad definitions of special needs and have chosen to define special needs in the following manner:

a. A child with a special health or medical condition;

b. A child with special developmental or learning needs; and/or

c. A child with special emotional or behavioral needs.

We also note that efforts to specifically document the number of special needs children in child care in California are occurring through the Map to Inclusive Child Care Project and the State Children and Families Commission. They will apply a standardized definition of special needs based on the Americans with Disabilities Act and will likely complement the findings of this report.
Surveys

During the spring and summer of 2001, we conducted surveys with child care providers to learn about their experiences in addressing the mental health and developmental needs of children. In Alameda County, center directors and family child care providers have historically been surveyed extensively about a variety of issues. They also endure a lot of paperwork. To minimize their burden and encourage their participation in this project, we chose not to conduct an extensive survey of directors, but to incorporate a few key questions into existing surveys. Four surveys recorded the insights of child care and mental health providers. They consisted of:

- A phone survey to tap the perspectives of family child care providers, which was part of a larger survey called the California Child Care Workforce Census;
- A written survey with child care center directors regarding their center’s experiences with children with special needs. This survey was also part of a larger survey entitled the Alameda County Child Care Center Salary, Benefits and Working Conditions Survey;
- A follow-up phone survey with child care center directors to elicit further information on certain populations of children and families;
- A written survey of mental health providers which documented the range of services they provide, the age group of children and the child care programs they serve.
The findings from the four surveys revealed a complex scenario in child care settings. Child care issues are as broad and complex as the families, the child care providers, and the specific needs of individual children. Several factors contribute to a constellation of resources and service gaps. Many of the survey responses we gathered also reflect limited program funding.

We begin by looking at the context and various factors in Alameda County that affect the interaction between children and the child care settings. Then, we analyze the responses of various child care providers and mental health providers.

The State of Alameda County

Many factors in Alameda County influence how families and child care providers can help young children. These conditions provide both challenges and opportunities, and in particular, frame the dynamics of how special needs and mental health needs are addressed in child care settings.

Alameda County, like many other counties, has been greatly affected by welfare reform. While the full impact has not been fully evaluated or understood, one key outcome has been an increased number of parents who are now working, in school, or in training or other community activities. The number of working parents is, however, also attributable to the increasingly high cost of living, which requires a single parent to work full time or a second parent to work to sustain a family’s economic well-being. As a result, many children who have had no previous experience in group settings are now in child care, and they are coping with separation from their parents for the first time.

Not surprising to many families, child care in Alameda County is expensive. In 2001, child care for children up to age two has been increasing each year and now averages $918 per month. Child care for children ages two to five in 2001 was an average of $651 per month and is also increasing annually.6

Child care providers face profound operational challenges. The child care industry has experienced persistently high staff turnover. In Alameda County, the staff who have the most contact with children, teachers and assistant teachers, have turnover rates of 22% and 29% respectively.7 The Alameda County Child Development Corps, enacted in 2000, has helped to recruit and retain child care staff by providing financial incentives for ongoing professional development. Along with local efforts, the benefits of the Corps and other retention and recruitment programs locally and nationally have had a positive impact on staff turnover and continue to be evaluated.

The ethnic and racial diversity of children in Alameda County reflects local demographic trends.8 Currently, youth ages 17 and younger are composed of 34% white/Caucasian, 25% Latino, 22% Asian/Pacific

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6 Children Now, County Data Book, 2001. Oakland, CA
7 Center for the Child Care Workforce, A Profile of the Alameda County Child Care Center Workforce, 1995-2001, February 2002.
Islander, and 19% African American populations. Moreover, 17.6% of children ages 0-17 are living in poverty. Of children in school (K-12), approximately 33% live at or below 185% of the poverty level. Likewise, child care providers in Alameda County are diverse in terms of their ethnic/racial background and language capabilities. Teachers are composed of 43% Caucasians, 14% Latinos, 25% African Americans, 13% Asian/Pacific Islander, and 1% Native Americans. Assistant teachers are composed of 35% whites, 27% Latinos, 23% African Americans, 10% Asian/Pacific Islander and 1% Native Americans.

Many child care providers in Alameda County are immigrants. For example, over one quarter of Child Development Corps applicants were born outside of the United States. This pattern corresponds with the demographic shifts in Alameda County and requires increased funding and operational changes to meet the ever-changing cultural and language needs of children, families and caregivers.

Findings

Our findings indicate that many child care providers do not feel properly equipped to meet the needs of children with challenging behaviors. They also suggest the lack of an adequate number of mental health providers who can help them identify and accordingly respond to a child with mental health or special needs. Staff in both family child care and center-based child care settings recounted the following key concerns and gaps in services and resources.

Children with Special Needs

Family child care providers responded that approximately one in four children in their care have some special need. Sixty one percent of the family child care respondents stated they wanted to improve their skills to care for additional children with special needs. However, the lack of such training options and their limited time availability hinders their ability to access training, which can further prevent special needs children from entering child care

The 82 child care directors in our survey reported that 13 percent of the children in their program have special needs. More specifically, they reported that 712 have children have special needs or some medical condition, 654 children have special developmental or learning needs, and 586 have special emotional or behavioral needs. Given our definition of special needs, this figure may reflect children who possess more than one special needs condition. What may be most compelling for child care providers is that they are trying to cope with situations where they feel ill equipped, whether the child has one special need or a combination of them.

Directors’ top concerns included aggressive and violent behavior of children, the need for speech therapy and other special needs support, and sporadic attendance of children in their centers.

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9 Center for the Child Care Workforce, A Profile of the Alameda County Child Care Center Workforce, 1995-2001, February 2002.
10 Authors’ analysis of data provided by Every Child Counts.
The comments of center directors illustrate pervasive issues about working with children with special
needs. One director described children with limited communication skills, which was often expressed
in (inappropriate) aggression. Several others reiterated their grave concern about the level of aggression
and violent behaviors that children exhibit.

While the proportion of children with special needs or mental health needs is relatively low, they pose a
heavy burden on the child care center staff and the frequency appears to be growing. High turnover rates
and poorly prepared staff make it even more difficult to provide quality care for children with special
needs as well as typically developing children.

As part of our center director survey, we asked what kinds of support or training their staff needed to care
for children with special needs. Here is a sample of their responses (complete responses are included in
Appendix A):

- We, as a staff, have been seeking information and training on recognizing developmental
delays and abnormalities. We would like to find clear information on where to refer parents
of a child that may show signs of some special need.
- We are encountering more and more children each year who have needs we cannot meet.
- We need at least a clinical social worker.
- (We need) professionals willing to work with children in private, non-profit schools, in areas
of speech and hearing especially.
- While we do not currently have children with special developmental needs, we have had
(them) in the past. We need to learn how to juggle the needs of all children with those of
the special needs children who can dominate teachers' time with behavioral problems.
- In the past, we have provided professional training for our staff to support them in this area.
  At a recent teacher/director retreat, they strongly recommended that we have access to
  professional services of a child psychologist and a developmental behaviorist at
  all times.
- Whenever possible some of the child’s therapy (should) happen in school in the normative
  play environment as a role model for staff on a regular basis.
- Speech/language delays – it would help to have staff training on how to identify children
  at risk; how to best approach the parents if they are unaware of the speech/language delay;
  ways to help a delayed speech child in the classroom.
- We are being asked to care for increasingly difficult issues and children with special needs
  that the staff are not trained to handle. Increased number of children with behavioral
  problems and emotional issues that impact the quality of the program and have a detrimental
  effect on staff, parents and other kids.
The Supply and Need of Child Care Mental Health Services

Less than 10 percent of child care programs in the County receive child care mental health consultation on an ongoing basis. Out of a total of 719 licensed child care centers in Alameda County, approximately 64 can access or are currently receiving training or technical assistance from an organization or mental health provider with expertise in child care mental health or special needs. Only three respondents, BANANAS, Inc., Madeline Meyer Riley and Children’s Hospital Oakland, stated that they serve family child care homes. (Other organizations and individuals in Alameda County indicated that they serve a specific catchment area, families referred to them or their clients were based on a specific funding source or payor.)

These numbers can be deceiving because many child care programs included in the above percentage have only limited access to consultation services. Also, inadequate capacity of mental health organizations severely limits how they can assist child care providers. In comparison, in San Francisco over 75 percent of its 233 centers and at least 100 family child care homes receive mental health consultation (See Graph 1).

When mental health providers were asked to compare the need for prevention, clinical and coordinated services with their availability, they indicated a grave disparity. For each type of service, respondents stated that child care providers had a need but that these services were not available (See Graph 2). These providers also stated that children with special needs, their parents and child care providers could ALL benefit from prevention and intervention services.
Suspensions and Terminations

When a child care program is unable to adequately address an individual child’s needs, they feel they have no other choice but to discontinue or suspend the child from their program. Among the mental health providers we surveyed, who are familiar with only a small percentage of centers in the County, the numbers were alarming. They reported that 163 children were suspended or discontinued from their child care program within the past 12 months. The range of issues which led to the suspension included aggressive and violent behaviors (e.g., biting and hitting others), severe emotional difficulties and disrupting the classroom.

These behaviors disrupt the child care setting, often casting a chilling effect on the other children and staff who may now doubt the safety and comfort of their environment and relationships. Children who are suspended or terminated from a child care setting will face difficulties as well. They will have a more difficult time being accepted into other child care options, adjusting to new child care or school settings, and trusting other caregivers and classmates. Correspondingly, their parents will have to make changes to their work schedules and occasionally lose pay in order to acquire new child care arrangements. This scenario is alarming because of the increased number of parents entering the workforce.

Available Mental Health Services for Children in Child Care

Currently, Alameda County has an array of organization and individuals who provide child care mental health services. However, these organizations and individuals are limited by the lack of funding and support, as well as a limited number of trained mental health providers. The 28 organizations and individuals we surveyed voiced the following key concerns:

- the lack of knowledge among child care teachers about children with special needs;
- inconsistent or insufficient funding for child care staff training and development, especially on children’s social and emotional needs;
- limited numbers of organizations and mental health providers with expertise in child care mental health; and
- current constraints under which many child care providers operate, including high staff turnover, limited release time for training and inadequate facilities.

Mental health providers who serve child care centers also provided information about their services (See the accompanying directory). Their staff, for instance, can meet language needs of many children and their families. Of 28 respondents, more than 60% have staff who speak Spanish. The next levels of language capabilities are Korean which is spoken by 18% of staff, Cambodian at 14%, Cantonese at 14%, Mandarin at 11% and Vietnamese at 11%. Most programs serve preschool children age 3-5 (See Graph 3).

Graph 3

Percentage of Mental Health Care Providers Serving Infants, Toddlers, Preschool Age and School Age Children

Barriers to Child Care Mental Health Services

The availability of mental health services alone cannot ensure adequate access and utilization. Mental health providers were asked about what they viewed as the top barriers to child care mental health services. The top three responses were:
- language issues;
- cultural differences and;
- lack of mental health providers with expertise in child care mental health.

Given the ethnic diversity and immigrant populations in Alameda County, it is particularly concerning to have language and cultural differences identified as key barriers to child care mental health services. Their concerns indicate that the needs of these diverse populations are not being properly addressed.
Referrals for Additional Services and Additional Supports

When a child with special needs requires additional services, a majority of the mental health service organizations and providers reported that they refer the family or the child care provider to the following sources (See Graph 4):

- Alameda County Behavioral Health Care Services Agency (85%),
- Individual specialists (76%),
- Public Health Department (52%), and
- Private mental health agency (45%).

Along with the child care provider, these sources currently serve as a critical resource to the child and her/his family. How parents and providers navigate any system to acquire the necessary information or services is important to understanding where resources need to be placed and how coordination and information exchange need to occur.

Additional supports can help mitigate the stress a child and her/his family faces. When asked what additional supports are necessary, mental health providers listed several issues, ranging from health coverage, early intervention, parent education, special needs and affordable, quality child care. Each item was identified by at least 80% of the respondents. In slight contrast, the lowest items reported as needed supports were transportation assistance, job training and adult basic education.
Recommendations

After analyzing the findings from the four surveys this project conducted, the following recommendations were developed to enhance a sustained system to serve ALL children and their families with the necessary collaboration of child care and mental health providers. As such, refinements of these initiatives will be necessary and would greatly benefit from the continued cooperation of these various stakeholders. The recommendations presented here serve as a crucial starting point from which to advance the responsiveness and the efficiency of such services to address this unmet, critical need.

1. Increase the number of child care centers that receive on-site mental health consultation by an additional 20 programs per year. Estimated cost: $160,000 per year

2. Increase the availability of training resources to enable child care providers to identify children with developmental delay or other behavioral health issues. Estimated cost: $75,000 per year

3. Provide child care staff with additional training and ongoing educational opportunities to promote cultural competency and improve the recruitment and retention of staff with such skills. Estimated cost: $75,000 per year

4. Ensure that every community college early childhood education course includes information on the connection between emotional and cognitive growth in children and places value on the relationships between caregivers, children and parents.

5. Increase the number of licensed mental health clinicians available to provide child care consultation, infant mental health and early childhood mental health services in Alameda County. Estimated cost: $160,000 per year

6. Ensure that all professional mental health training institutions include a component on early childhood education programs and places value on the relationships between caregivers, children and parents.

7. Implement and fund a study to:

   - explore the correlation between suspensions from child care and the availability of child care mental health consultation;
   - develop and coordinate a set of guidelines or standards, such as best practices, for child care mental health services;
   - conduct a follow-up survey to assess child care providers’ perceptions about their ability to serve children with behavioral health or development delay conditions. Estimated cost: $45,000
Appendix A:
Written Questionnaire of Child Care Center Directors
Additional Questions for the Alameda County Child Care Center Wages, Benefits and Working Conditions Survey

Child care programs play an important role by caring for children with special needs in Alameda County. In these brief questions we ask you to provide information about children with special needs in your program and to comment on the supports you may need to care for children with special needs.

1. How many children do you have enrolled in your program? If you oversee multiple sites, please report the total number of children in all Alameda County sites.

2. To the best of your knowledge, how many of the children you reported in Question 1 have a special health or medical condition? For example: asthma, diabetes, seizure disorder or severe allergies. Write “0” if none.

# ________  
don’t know _______

3. To the best of your knowledge, how many children have special developmental or learning needs? For example: speech and language delays, autism, mental retardation, or Down Syndrome. Write “0” if none.

# ________  
don’t know _______

4. To the best of your knowledge, how many children have special emotional or behavioral needs? Write “0” if none.

# ________  
don’t know _______

*Please note that children can be reported in more than one category.

Continue to next page...
5. What kinds of support or training do you believe you and/or your staff need to provide for the care and development of children with special needs?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Thank you!
For questions, please call Rachel Cleary at (510) 208-9516.
ID Number:___________
Responses to the Question: “What kinds of support or training do you believe that you and/or your staff need to provide for the care and development of children with special needs?”

- Need more staff who are mature and have training in special needs
- Access to professionals to diagnose problems identified by staff.
- More classes from local colleges on special needs care.
- On-site evaluations and training for dealing with children who have special behavioral and emotional needs, especially children who come from dysfunctional homes.
- Help to understand what support our staff can give to children faced with divorce and separation.
- Need names and phone numbers of counselors who work on a sliding scale.
- Support and tips to help children with speech problems.
- Discipline strategies.
- Special training, college courses, internships for practical experience
- Special education/medical professionals who can come to our school for training at staff meetings
- Printed information dealing with specific teaching challenges of children with special needs, realistic coping strategies, group management issues, how best to support the child and family, what to say (or not) about child’s needs to other children in the program, realistic expectations
- A pool of trained respite volunteers who can come into the center and provided one-on-one care as needed to respond to a specific child's needs
- Professional tools to assess children with special need, a referral system to send parents to, information to give to parents to enlighten them
- Resources to give to parents for assessments
- Additional teachers. With each child, an additional teacher for autism and some down syndrome.
- Training on asthma attack recognition and response and speech delays.
- Patience
- Training
- Therapists to do site observations
- Staff training, Specialists to come to school to prescreen
- Dealing with strong negative behavior with other children—not being able to cope during transition times
- Staff who know what to do with children with special needs
- Lower ratio of teacher to child
- Parents who value the job that day care staff do with special needs children
- Continual feedback from special needs staff that work with the child or children away from the center.
- Speech therapy
- Training in how to handle hyperactive children
- On-site workshop with a person trained in special needs
- Specialized training for classroom staff in working with young children with special needs and their parents and training in working with other agencies and school districts serving children with special needs
- Case managers come on site to have a transition meeting
- Therapists communicate and train staff on a regular basis
- Whenever possible some of the child’s therapy happens in school in the normative play environment as a role model for staff
- That when a classroom has several children who are significantly involved money for additional teachers is available
• Serving children with challenging behaviors
• Serving children with special needs like homelessness, abandonment, abuse, neglect, witness to violence and supporting their parents
• How to connect parents to the resources they need
• Training in all areas of special needs, resource referrals, visits, observations, evaluations
• More background to identify speech problems, ADHS profiles, autism
• Support from pediatricians
• A paid resource person to come observe in classroom and have them make recommendations
• Behavioral management classes
• A wholistic reference which puts specific conditions and need in the context of quality developmental programs – need more context for appropriate inclusion
Appendix B:
Follow-Up Phone Survey with Child Care Center Directors
Additional Questions for the Needs Assessment Survey

Hi. My name is Rachel Cleary. I am calling on behalf of the Alameda County Child Care Planning Council. I have a few questions to ask you. Is this an OK time for you? Great!

First, I’d like to ask some brief questions about the children in your program.

Can you tell me about any observations or concerns you or your staff may have about the children in your care (i.e. attendance rates, adjustment issues, behavioral issues)?

________________________________________________________
________________________________________________________
________________________________________________________
________________________________________________________
________________________________________________________
________________________________________________________
________________________________________________________
________________________________________________________
________________________________________________________

To the best of your knowledge, are you serving children who are receiving a CalWORKs voucher? ___yes       ___no

If yes, how many? (Please estimate if you are unsure.)____________________

Now I’d like to ask you about how the energy crisis has affected your program.

Has your electricity bill increased? If so, how much has it increased since the beginning of the year?

____________________________________

Is there anything else that you would like to add about how the energy crisis has affected your program?

___________________________________________________________________________
___________________________________________________________________________
Thank you for your time.
Appendix C:
Survey of Child Care Mental Health Providers in Alameda County
# Prevalent Mental Health Services for Young Children in Alameda County

**ALAmedA COUNTY CHIld Care**  
**Mental Health Services Survey**

Please review this document. We will call you within two weeks to follow-up with a phone interview. Thank you in advance for your time!

1. Which best describes your position/program? (Check all that apply.)

| Child care mental health consultant for: | q family child care homes  
| | q child care centers | 
| Ages served: | q infants (0-18 months)  
| | q toddlers (18-36 months)  
| | q preschool age children (3-5 years)  
| | q school age children (5+ years) |
| Population served: | q CalWORKS children  
| | q Children with special needs  
| | (identified by the school district, foster care or Regional Center system only)  
| | q don’t know  
| | q other (Please list) |
| Languages provided: | q English  
| | q Spanish  
| | q Cantonese  
| | q Vietnamese  
| | q Other (Please list) |
| Services provided: | q general training on child development  
| | q staff development  
| | q program/case consultation  
| | q early referral  
| | q mental health intervention  
| | q direct therapy with children  
| | q child-parent therapy  
| | q parent support groups  
| | q family support services  
| | q therapeutic pre-school  
| | q therapeutic play groups  
| | q other ______________________ |
| Length of service: | q drop-in, one-time  
| | q on-going, long-term  
| | q short-term, goal-oriented  
| | q other ______________________ |
2. Which best describes your organization?
   - local public health agency
   - local behavioral health agency
   - nonprofit organization
   - private practice
   - other ______________________

3. Please list the child care programs you serve.

4. How many children do you serve?
   - Including yourself, how many of your staff provide child care mental health services?
     __________ full-time employees
     __________ part-time employees
   
   For each person listed above, please describe their training or qualifications (i.e. intern, licensed psychologist, social worker, etc.)
   
   Employee #1:
   Employee #2:
   Employee #3:

5. How did you develop your expertise in child care mental health services?
   - PhD/Licensed Psychologist
   - MSW degree/LCSW
   - MA degree/MFT
   - worked in the child care field
   - other ______________________
   
   When providing mental health consultation services in the child care community, how often does the need for the following mental health services and support arise?

<table>
<thead>
<tr>
<th></th>
<th>not needed</th>
<th>needed</th>
<th>not available</th>
<th>available</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Prevention services:</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(b) Clinical services:</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(c) Community coordinated services:</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6. Who needs these mental health services?
   - a) children: 1 2 3 4 5
   - b) families: 1 2 3 4 5
   - c) child care providers/staff: 1 2 3 4 5
9. Assuming that services are provided at the child care site, what are the barriers to accessing mental health services in your community? (check all that apply)

- cost
- not enough mental health care professionals trained to work with young children
- lack of knowledge of mental health system
- limited mental health services
- negative attitude/stigma toward mental health
- mental health services unavailable
- diversity/cultural issues
- language issues/differences
- transportation difficulties
- takes too long to get services
- don’t know anyone who can provide the service
- others

10. In addition to mental health services, what other supports are needed?

<table>
<thead>
<tr>
<th>Support</th>
<th>Not Needed</th>
<th>Most Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>health insurance coverage</td>
<td>1  2  3  4  5</td>
<td></td>
</tr>
<tr>
<td>health screening</td>
<td>1  2  3  4  5</td>
<td></td>
</tr>
<tr>
<td>substance abuse treatment</td>
<td>1  2  3  4  5</td>
<td></td>
</tr>
<tr>
<td>legal aid</td>
<td>1  2  3  4  5</td>
<td></td>
</tr>
<tr>
<td>welfare</td>
<td>1  2  3  4  5</td>
<td></td>
</tr>
<tr>
<td>early intervention/special education</td>
<td>1  2  3  4  5</td>
<td></td>
</tr>
<tr>
<td>conflict resolution</td>
<td>1  2  3  4  5</td>
<td></td>
</tr>
<tr>
<td>parental education</td>
<td>1  2  3  4  5</td>
<td></td>
</tr>
<tr>
<td>caregiver education and training</td>
<td>1  2  3  4  5</td>
<td></td>
</tr>
<tr>
<td>housing assistance</td>
<td>1  2  3  4  5</td>
<td></td>
</tr>
<tr>
<td>Other (Please list):</td>
<td>1  2  3  4  5</td>
<td></td>
</tr>
</tbody>
</table>

11. Do you coordinate with other support services? If yes, which ones?

- yes
- no

12. Where do you refer families and child care providers for additional mental health services and support?

- local public health department
- public mental health agency
- private mental health agency
- individual specialist
- other (please list):
13. Have you ever worked with a child who has been suspended from or asked to leave a child care center for reasons related to his/her behaviors or mental health status? If yes, what was the reason?
   - yes
   - How many in the past year:
   - Reason:
   - no

14. Have you worked in a child care center where you feel that there are pressures for children to succeed academically? If yes, please describe.
   - yes
   - no

15. Who else is doing similar mental health work in child care centers in Alameda County?

16. Who currently pays for your services? (Please list all funding sources, including in-kind.)

17. How much funding for child care mental health services did you receive last year?

18. What is the most frustrating aspect of your work in child care mental health services?

19. What is the most rewarding aspect of your work in child care mental health services?

20. What kind of additional training would assist you to meet the mental health needs of children in child care?

21. Is there anything else you would like to add about what you are seeing in child care settings?
22. For purposes of listing you in our directory of child care mental health services, please tell us the following information:

Name ________________________________________________________________

Agency Name __________________________________________________________

Address ______________________________________________________________

Telephone Number ______________________________________________________

Email _________________________________________________________________

Fax Number ____________________________________________________________

Thank you for your time.
Appendix D:
Alameda County Directory of Early Childhood Mental Health Services (0-6) and Child Care Mental Health Services and Consultation
The Early Childhood Mental Health Systems Development Group and the Alameda County Child Care Planning Council express their gratitude to the many organizations and mental health providers that participated in the development of this directory and the corresponding report. This directory and the research project was funded by the Alameda County Social Services Agency with additional support from the Alameda County Behavioral Health Care Services Agency and the Alameda County Child Care Planning Council. The surveys were conducted by Rachel Cleary, research assistant. The final development of the directory was completed by Mingyew Leung, policy consultant.

The following is a list of early childhood mental health providers serving young children in Alameda County. The organizations and individuals contained in this list completed a survey developed during the summer of 2001.

The information provided here does not necessarily constitute a recommendation. This directory serves as a resource. Those seeking information should assess the quality of the services by interviewing those listed here and also by speaking with references.

Please note that this is a dynamic document that reflects a particular point in time and is intended to depict the broad range and scope of services currently offered in Alameda County. Many of the listed organizations do not exclusively serve children ages 0-5. In addition, the frequency, availability and type of services may change or vary due to shifts in staff, funding and other factors. Some of the listed persons or organizations may be limited in their ability to serve additional clients. Please read the descriptions carefully to identify those that may be contacted for assistance.

We made every effort to contact and identify all providers who offer child care mental health and early childhood mental health services in Alameda County. Additional mental health providers who serve young children in Alameda County may not have been identified and accordingly included at this time.

Please contact the Alameda County Child Care Planning Council at 1401 Lakeside Dr., 11th floor, Oakland, CA 94612; phone (510) 208-9631, fax (510) 208-9579, or Agarling2@co.alameda.ca.us regarding additions or changes to future versions of this directory. For additional copies of this directory, you may contact Lupe Gonzalez by phone (510) 208-9578; fax (510) 208-9579, or email (Lgonzales@co.alameda.ca.us); or you may download an electronic version via the internet at www.co.alameda.ca.us/childcare/index.html.
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ACCESS, Acute Crisis Care and Evaluation for Systemwide Services, a member helpline, can answer questions about locating and receiving mental health services. It is open 24 hours a day, 7 days a week. ACCESS refers to direct services.

**Type of Organization:**
- local behavioral health agency

**Staff:**
- 18 employees including licensed psychologists, social workers, and marriage-family therapists.

**Services:**
- referrals for assessment and treatment
- referrals for psychodiagnostic testing
- referrals for medication evaluation and support

**Length of service:**
- referrals as needed

**Ages served:**
- infant (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)

**Languages spoken:**
- Referrals are made in as many languages as AT&T language line can provide.

**Child care programs served:**
- none

**Funding sources:**
- Alameda County Medi-Cal Beneficiaries-referred by self or by MOU agreements
- Children and Family Services Clients-referred by CFS workers
- Health Families Alliance Clients
- Kaiser Alliance Medi-Cal Clients
- Healthy Families S.E.D. Clients-referred by their MHP
- CalWORKs Clients-self referred or referred by outreach staff
- First Care, Family Care and Group Care Alliance Clients
- Medically Indigent Children

**Contact:**
(800) 491-9099
**ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES**
**The Early Childhood Consultation Program**
303 Hegenberger Rd., Suite 312, Oakland, CA 94621

The goals of Alameda County’s Behavioral Health Care Services are to provide a comprehensive network of integrated programs and services for all people with serious psychiatric disabilities, regardless of age, ethnicity, language or geographic location; in order to minimize hospitalization, stabilize and manage psychiatric symptoms, and help them achieve the highest possible level of successful functioning in their community of choice; and to provide mental health crisis and recovery services following major disasters; and, in addition, to improve the quality of prevention, treatment, and rehabilitation services in order to reduce illness, death, disability and cost to society resulting from substance abuse.

**Type of Organization:**
- local behavioral health agency

**Staff:**
- 2 full-time social workers, 1 program coordinator. They all have outpatient mental health experience as well as case management with high risk families. Staff has prior experience in preschool and elementary school settings.

**Services**
Mental health consultation to child care programs which includes:
- general training on child development
- staff development
- program/case consultation
- early identification and referral
- mental health intervention
- family support services

**Length of service:**
- on-going, long-term

**Ages served:**
- toddlers (18-36 months)
- preschool age (3-5 years)

**Languages spoken:**
- English
- Spanish
- Korean

**Child care programs served:**
Serve child care programs throughout Alameda County. Child care programs served currently:
- Oakland Head Start (Brookfield site)
- Oakland Unified School District (2 of 22 sites, 4 classrooms)
- Chabot College (2 classrooms)
- Eden Youth and Family Center

**Funding sources:**
- Every Child Counts – Prop 10
- Alameda County Behavioral Health Care Services
- Alameda County Social Services

**Contact:**
- Margie Gutierrez-Padilla
  (510) 777-2103
ASIAN COMMUNITY MENTAL HEALTH SERVICES
210 8th Street, Suite 201, Oakland, CA 94607

ACMHS provides comprehensive culturally appropriate behavioral health care services for Asian Pacific children and their families.

**Type of Organization:**
- local behavioral health agency
- nonprofit organization

**Staff:**
- 4 full-time employees including one licensed social worker.

**Services:**
- general training on child development
- staff development
- program/case consultation
- early referral
- mental health intervention
- direct therapy with children
- child-parent therapy
- parent support groups
- family support services

**Length of service:**
- drop-in, one-time
- short-term, goal-oriented
- on-going, long-term

**Ages served:**
- preschool age (3-5 years)

**Languages spoken:**
- English
- Cantonese
- Vietnamese
- Cambodian
- Mien
- Lao
- Korean
- Japanese
- Tagalog

**Child care programs served:**
- Oakland Head Start
  (5 sites including Franklin, San Antonio Park, San Antonio CDC, Sun Gate, Franklin)

**Funding sources:**
- Oakland Head Start

**Contact:**
- Esther Wong (510) 869-6087
Asian Pacific Psychological Services is committed to providing culturally and linguistically competent comprehensive mental health services to the Asian Pacific community. Their priority is serving the disadvantaged Asian immigrant and refugee families who otherwise have limited access to care.

**Type of Organization:**
- nonprofit organization

**Staff:**
- 1 full-time licensed social worker and 1 part-time licensed social worker.
- 6 full-time marriage-family therapists and ACSW
- 3 part-time MFT and ACSW.

**Services:**
- evaluation/assessment
- case management
- direct therapy with children
- child-parent therapy
- parenting therapy
- parent support groups
- family support services
- training for mental health professionals
- training for mental health interns
- supervision

**Length of service:**
- short-term, goal-oriented
- on-going, long-term

**Ages served:**
- school age (5+ years)

**Languages spoken:**
- English
- Cantonese
- Vietnamese
- Cambodian
- Mien
- Khmu
- Korean
- Japanese
- Mandarin

**Child care programs served:**
- none

**Funding sources:**
- EPSDT
- Medi-Cal
- special program for diagnosing and evaluating children

**Contact:**
- Dr. Amy Mass (510) 233-7555
BANANAS, Inc. is the child care resource and referral agency that serves Northern Alameda County.

**Type of Organization:**
- nonprofit organization

**Staff:**
- 1 part-time licensed marriage-family therapist with training in play therapy and 1 part-time social worker.

**Services:**
- general training on child development
- staff development
- program/case consultation
- early referral
- mental health intervention
- parent support groups
- family support groups

**Length of service:**
- short-term, goal-oriented
- warm line phone

**Ages served:**
- infants (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)

**Languages spoken:**
- English
- Spanish
- Cantonese
- Vietnamese
- Mien
- Laotian
- Cambodian
- Tagalog
- Thai
- Mandarin
- Tigrina
- Amharic

**Child care programs served:**
- Every program in Northern Alameda County is eligible.

**Funding sources:**
- various

**Contact:**
- Madeline Meyer Riley or Betty Cohen
  (510) 658-7101
**BERKELEY MENTAL HEALTH**  
**FAMILY, YOUTH AND CHILDREN’S SERVICES**  
1925 Derby Street, Berkeley, CA 94704

Family, Youth and Children's Services programs include outpatient clinical services, adolescent clinical services, on-site clinical services at Berkeley Unified schools, and community-based groups and consultation or liaison services.

**Type of Organization:**
- local public mental health agency

**Staff:**
- 4 full-time employees and 4 part-time employees including 2 psychologists, 6 social workers, 2 marriage-family therapists and 1 psychiatrist.

**Services:**
- general training on child development
- staff development
- program/case consultation
- early referral
- mental health intervention
- direct therapy with children
- child-parent therapy
- parent support groups
- family support services

**Length of service:**
- short-term, goal-oriented
- on-going, long-term

**Ages served:**
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)

**Languages spoken:**
- English
- Spanish
- Cantonese
- Mandarin

**Child care programs served:**
- Berkeley Head Start
- Willard Middle School-Based Health Center at Berkeley High School
- LeConte
- Emerson
- Longfellow

**Funding sources:**
- Medi-Cal

**Contact:**
- Matthew R. Mock (510) 644-6617
The Child Care Health Program has public health nurses available to answer health related questions and make referrals through their toll-free Healthline phone.

**Type of Organization:**
- nonprofit organization

**Staff:**
- 2 full-time employees including 1 social worker.

**Services:**
- general training on child development
- program/case consultation
- referrals to mental health services

**Length of service:**
- drop-in, one-time

**Languages spoken:**
- English

**Ages served:**
- infants (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)

**Child care programs served:**
- All child care centers and family day care programs can call the Healthline.

**Funding sources:**
- Child Development Division of the California Department of Education

**Contact:**
- Healthline (800) 333-3212
  (Monday - Thursday, 8:00 a.m. - 4:00 p.m., closed on Fridays)
The Chabot College Children’s Center serves the Chabot community by providing training to students of early childhood development, and quality care for children of students, faculty and staff.

**Type of Organization:**
- community college

**Staff:**
- 1 part-time licensed marriage-family therapist with play therapy training.

**Services:**
- general training on child development
- staff development
- program/case consultation
- mental health intervention
- direct therapy with children
- parent support groups
- family support services

**Length of service:**
- short-term, goal-oriented
- on-going, long-term

**Ages served:**
- infants (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)

**Languages spoken:**
- English

**Child care programs served:**
- Chabot College Children’s Center

**Funding sources:**
- Chabot College Children’s Center

**Contact:**
- Madeline Meyer Riley (510) 723-6684
CHILDREN'S HOSPITAL
747 52nd Street, Oakland, CA 94618

Children's Hospital promotes the health care and social welfare of vulnerable children and their families. Several programs provide mental health services to children age 0-5. Some programs have specific criteria and others are available to all community children. See individual program descriptions for details.

Type of Organization:
- nonprofit organization

1. Center for Child Protection
This department provides assessment, medical evaluation, therapy and case management for children who have been sexually or physically abused or neglected.

Staff:
- 4 case managers, and 5 therapists

Services:
- evaluation/assessment
- case management

Length of service:
- on-going, long-term

Ages served:
- infant (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)

Languages spoken:
- English
- Spanish
- Farsi
- Others as needed

Child care programs served:
- Oakland Head Start (4 sites)
- Teen parent programs at Castlemont and Oakland High
- Some family day care programs

Funding sources:
- Grants
- Insurance (Medi-Cal)

Contact:
Shelly Hamilton, (510) 428-3885, ext. 3588
Center for the Vulnerable Child
CVC’s mission is to meet the psychological needs of vulnerable children and families in Alameda County by providing a variety of programs and services.

Staff:
- 4 full-time and 8 part-time employees:
  - 4 are licensed psychologists, 2 are licensed social workers, and 1 is a marriage family therapist.

Services:
- general training on child development
- case management
- program/case consultation
- early referral
- mental health intervention
- direct therapy with children
- child-parent therapy
- parent education and support groups
- family support services
- therapeutic nursery

Length of service:
- short-term, goal-oriented
- on-going, long-term

Ages served:
- infants (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)

Languages spoken:
- English
- Spanish

Child care programs served:
- none

Funding sources:
Alameda County Social Services
Alameda County Prop. 10 – Every Child Counts
Alameda County Behavioral Health Care
Federal and Foundation grants

Contact:
Diana Kronstadt (510) 428-3148
3. Child Psychiatry

Staff:
6 staff plus interns

Services:
- Assessment/evaluation
- Treatment

Length of service:
varies

Ages served:
- preschool age (3-5 years)
- school age (5+ years)

Languages spoken:
- English

Child care programs served:
- none

Funding sources:
- Insurance

Contact:
(510) 428-3885, ext. 3571

4. Department of Developmental and Behavioral Pediatrics

This department provides developmental and mental health assessment services for children. Some additional case management and support services are available on a limited basis.

Staff:
Developmental pediatrician, psychologist, speech therapists, and professionals from other clinics and other experts depending on need.

Services:
- Assessment and diagnoses
- Treatment
- Case management

Length of service:
varies

Ages served:
- infants (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)

Languages spoken:
- English

Child care programs served:
- none

Funding sources:
- various

Contact:
(510) 428-3885, ext. 3351
5. Early Intervention Services

Staff:
More than 35 staff provide a variety of services.

Services:
- Training and consultation on children development and mental health
- Program/CASE consultation to other agencies involved with the family (including child care providers)
- Mental health services for families with infants and toddlers.
- Family and parent support
- Developmental & mental health assessment

Length of service:
Usually long term.

Ages served:
- Infants (0-18 months)
- Toddlers (18-36 months)
- Preschool age (3-5 years)

Languages spoken:
- English
- Spanish

Child care programs served:
Some consultation available to staff of child care programs where their participating child is enrolled in programs of the Early Intervention Services

Funding sources:
- Prop 10
- Department of Health
- Other grants
- Regional Center
- Special Education

Contact:
- Parent Infant Program (where child is eligible for Regional Center):
  Karen Tanner, (510) 428-3408.
- Special Start and Medically Vulnerable Infant Program (for children with medical fragility and social risk):
  Mary Claire Heffron, (510) 428-3885, ext. 2218
- Infant & Early Childhood Mental Health Programs referrals:
  Sara Grunstein, (510) 428-3885, ext. 5932.
COMMUNITY COUNSELING AND EDUCATION CENTER
3775 Beacon Avenue, 2nd Floor, Fremont, CA 94538

Community Counseling and Education Center has provided general mental health counseling and prevention services designed for at-risk youth in Alameda County since 1978. CCEC has specialized programs providing services to at-risk adolescents and mental health services to very young children.

Type of Organization:
• nonprofit organization

Staff:
• One licensed psychologist

Services:
• general training on child development
• staff development
• program/case consultation
• mental health intervention

Length of service:
• on-going, long-term

Ages served:
• infants (0-18 months)
• toddlers (18-36 months)
• preschool age (3-5 years)

Languages spoken:
• English

Child care programs served:
• Tri-Cities Children’s Centers

Funding sources:
• Tri-Cities Children’s Centers

Contact:
• Deborah Turner (510) 792-4964
Davis Street Community Center’s mission is to help people with low income of the Eden area improve their quality of life through short and long term assistance.

**Type of Organization:**
- nonprofit organization

**Staff:**
- Contracts and consultants, including two interns, who provide in-house services only.

**Services:**
- staff development
- program/case consultation
- early referral
- family support services

**Length of service:**
- on-going, long-term

**Ages served:**
- infants (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)

**Languages spoken:**
- English
- Spanish

**Child care programs served:**
- Davis Street Child Development Programs only.

**Funding sources:**
- General fund and grant writing

**Contact:**
- Jeanine Edmond (510) 347-4620
East Bay Agency for Children provides critically needed services to children who suffer from abuse and/or neglect, are coping with the strain of living in poverty, or need help through a crisis in their lives.

**Type of Organization:**
- local behavioral health agency
- nonprofit organization

**Staff:**
- 23 full-time employees, including 6 mental health professionals, 6 social workers, 1 licensed social worker, 4 program directors, 3 teachers and 3 teachers assistants at 4 sites.

**Services:**
- general training on child development
- staff development
- program/case consultation
- early referral
- mental health intervention
- direct therapy with children
- child-parent therapy
- parent support groups
- family support services
- therapeutic preschool
- therapeutic play groups

**Length of service:**
- short-term, goal-oriented
- on-going, long-term

**Ages served:**
- toddlers (18-36 months)
- preschool age (3-5)
- school age (5+ years)

**Languages spoken:**
- English
- Spanish

**Child care programs served:**
- Therapeutic Nursery School
- Fremont, New Haven and Oakland day treatment programs

**Funding sources:**
- Alameda County
- Prop. 10
- Prop. 10 Every Child Counts
- school districts
- private donations
- corporate donations

**Contact:**
- Daniel Litowski-Ducasa (510) 268-1073
CITY OF FREMONT INFANT/ TODDLER PROGRAM
YOUTH AND FAMILY SERVICES
39155 Liberty Street, Suite E500, Fremont, CA 94537

The Infant Toddler Program provides therapy for families of children under 5 years old. Case management is available. ITP coordinates a network of southern Alameda County providers (mental health and other services) for children 0-5 years.

**Type of Organization:**
- local behavioral health agency
- government agency

**Staff:**
- 1 part-time marriage-family therapist.
- Part-time case managers

**Services:**
- evaluation/assessment
- case management
- child-parent therapy
- parenting therapy
- training for mental health professionals
- training for non-mental health providers

**Eligibility criteria:**
Residents of Fremont, Union City or Newark

**Length of service:**
- short-term, goal-oriented
- on-going, long-term

**Ages served:**
- infants (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)

**Languages spoken:**
- English

**Child care programs served:**
- none

**Funding sources:**
- fee for service on a sliding basis
- Medi-Cal
- grant from Every Child Counts
- City of Fremont general funds

**Contact:**
- Margaret Rossoff (510) 574-2124
MARY CLAIRE HEFFRON
2340 Ward Street, Suite 105, Oakland, CA 94705

Type of Organization:
- private practice

Staff:
- 1 part-time licensed psychologist.

Services:
- assessment/evaluation
- infant-child-parent therapy
- family therapy

Length of service:
- varies

Ages served:
- infant (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)

Languages spoken:
- English

Child care programs served:
- none

Funding sources:
- Medi-Cal
- individual insurance
- fee for service

Contact:
Mary Claire Heffron (510) 848-7994
Preventative Mental Health Services for Young Children in Alameda County

JOELLEN HILMO
20980 Redwood Road, Suite 230, Castro Valley, CA 94546

Type of Organization:
• private practice

Staff:
• 2 part-time licensed psychologists.

Services:
• evaluation/assessment
• direct therapy with children
• child-parent therapy
• early referral
• crisis referral

Length of service:
• short-term, goal-oriented
• on-going, long-term

Ages served:
• infants (0-18 months)
• toddlers (18-36 months)
• preschool age (3-5 years)
• school age (5+ years)

Languages spoken:
• English

Child care programs served:
• none

Funding sources:
• Victim's Assistance
• private insurance

Contact:
• JoEllen Hilmo (510) 889-0359
JEWISH FAMILY AND CHILDREN’S SERVICES
2484 Shattuck Avenue, Berkeley, CA 94704

Jewish Family and Children’s Services offers a full range of programs and services designed to alleviate suffering and empower individuals and families to lead healthy, satisfying lives. JFCS provides counseling, consultation, support groups and parenting workshops for families with young children.

Type of Organization:
- nonprofit organization

Staff:
- 3 full-time employees and 4 part-time employees including 1 licensed psychologist, 3 licensed marriage-family therapists and 3 marriage-family therapist interns.

Services:
- general training on child development
- staff development
- program/case consultation
- early referral
- mental health intervention
- direct therapy with children
- child-parent therapy
- parent support groups
- family support services

Length of service:
- drop-in, one-time
- short-term, goal-oriented
- on-going, long-term

Ages served:
- infants (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)

Languages spoken:
- English
- Hebrew
- Spanish
- Farsi
- Russian
- Cambodian

Child care programs served:
- All 11 Jewish preschools plus 2 Jewish day schools in the East Bay.
- Parent Child Development Inc. (2 sites)
- Midrashot

Funding sources:
- Grants
- private foundations,
- fee for service
- CalWORKs
- insurance companies

Contact:
- Amy Weiss (510) 704-7475
**LESLIE KAYS**  
2287 Washington Avenue, San Leandro, CA 94577

**Type of Organization:**  
- private practice

**Staff:**  
- 1 marriage-family therapist.

**Services:**  
- evaluation/assessment  
- program/ case consultation  
- direct therapy with children  
- child-parent therapy  
- parenting therapy  
- training for mental health interns

**Length of service:**  
- short-term, goal-oriented  
- on-going, long-term

**Ages served:**  
- infants (0-18 months)  
- toddlers (18-36 months)  
- preschool age (3-5 years)  
- school age (5+ years)

**Languages spoken:**  
- English

**Child care programs served:**  
- none

**Funding sources:**  
- county  
- fee for service  
- insurance

**Contact:**  
- Leslie Kays (510) 287-9206
ROSARIO MURGA KUSNIR
1440 Broadway #908, Oakland, CA 94612

Type of Organization:
• private practice

Staff:
• 1 full-time marriage-family therapist.

Services:
• program/case consultation
• direct therapy with children
• child-parent therapy
• parenting therapy
• parent support groups

Length of service:
• short-term, goal-oriented
• on-going, long-term

Languages spoken:
• English
• Spanish

Ages served:
• infants (0-18 months)
• toddlers (18-36 months)
• preschool age (3-5 years)
• school age (5+ years)

Child care programs served:
• Head Start in Oakland (92nd Ave site)
• Centro Vida in Berkeley

Funding sources:
• Medi-Cal
• Health Families
• Value Options
• VOC (trauma related)

Contact:
• Rosario Murga Kusnir, MFT
  (510) 524-6166
La Clinica de la Raza delivers affordable, culturally and linguistically appropriate health care services to Alameda County residents. La Clinica provides a comprehensive array of services, such as medical, mental health, health education and dentistry. The mental health services include biofeedback, stress management, child abuse counseling, counseling, psychotherapy, family therapy, group therapy, and relationship counseling.

**Type of Organization:**
- local behavioral health agency
- nonprofit organization

**Staff:**
- 12 full-time and 3-part-time employees. All are registered with the Board of Behavioral Sciences and are master’s level and licensed or nearly so.

**Services:**
- evaluation/assessment
- case management
- crisis referral
- direct therapy with children
- child-parent therapy
- parenting therapy
- parent support groups
- family support services
- therapeutic play groups
- training for mental health professionals
- training for mental health interns
- training for non-mental health service providers
- supervision

**Length of service:**
- drop-in, one-time
- short-term, goal-oriented
- on-going, long-term

**Ages served:**
- infants (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)

**Languages spoken:**
- English
- Spanish

**Child care programs served:**
- none

**Funding sources:**
- Alameda County Behavioral Health Care Services
- Child Abuse Prevention Funds

**Contact:**
- Leslie Preston (510) 535-4167
Ann Martin Children’s Center provides child and family psychotherapy, academic tutoring and remediation, educational and psychological diagnostic testing.

**Type of Organization:**
- nonprofit organization

**Staff:**
- 1 part-time doctoral level psychologist at Head Start
- 30 clinicians overall, including LCSW, MFT, PhD, Psychologists, pre- and post-graduate interns.

**Services:**
- general training on child development
- program/case consultation
- early referral
- mental health intervention
- psychological & educational testing
- school-based mental health services at Oakland Unified School District (Lakeview Elementary, Piedmont Avenue Elementary, Fremont High School, Oakland Technical High School, and Calvin Simmons Middle School)

**Length of service:**
- on-going, long-term

**Ages served:**
- infant (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)
- adults, couples and families

**Languages spoken:**
- English
- Spanish
- Vietnamese
- Arabic
- Hebrew
- Dutch

**Child care programs served:**
- Head Start and Early Start programs administered by the Spanish Speaking Unity Council (3 sites)

**Funding sources:**
- Spanish Speaking Unity Council
- Alameda County Behavioral Health Care Services Agency
- Alameda County ACCESS
- Alameda County Department of Social Services
- private pay
- grants

**Contact:**
- Laurie Lober (510) 655-7880
# PARENTAL STRESS SERVICE

1727 Martin Luther King Jr. Way, Oakland, CA 94612

Parental Stress Service, Inc is a non-profit organization of mental health professionals and dedicated volunteers who help families in Alameda County who have abused their children or are at risk of abusing their children.

**Type of Organization:**
- nonprofit organization

**Staff:**
- 2 full-time employees, 1 LCSW and 1 marriage and family therapists

**Services:**
- case management
- direct therapy with children
- child-parent therapy
- parenting therapy
- family support services
- training for mental health professionals
- training for mental health interns
- supervision (in-house only)

**Length of service:**
- short-term, goal-oriented
- on-going, long-term

**Ages served:**
- infants (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)

**Languages spoken:**
- English
- Spanish

**Child care programs served:**
- none

**Funding sources:**
- Medi-Cal
- VOC

**Contact:**
Lesley Sternin, (510) 893-9230, ext. 235
PATHWAYS COUNSELING CENTER  
Girls, Inc.  
13666 East 14th Street, San Leandro, CA 94578

Pathways Counseling Center operates as a general outpatient mental health clinic.

**Type of Organization:**
- nonprofit organization

**Staff:**
- 8 full-time staff therapists and 2 part-time interns, one who is an early head start teacher and director. 1 full-time case manager.

**Services:**
- general training on child development
- staff development
- program/case consultation
- early referral
- mental health intervention

**Length of service:**
- on-going, long-term

**Ages served:**
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)

**Languages spoken:**
- English
- Spanish

**Child care programs served:**
- Wilson Elementary
- Lockwood Elementary

**Funding sources:**
- A grant

**Contact:**
- Becky Cannon (510) 357-5515
Psychological Services Center is a community mental health clinic that has been serving the Bay Area for over 20 years as part of the California School of Professional Psychology. It also operates the Family Violence Institute and the Alternative Family Institute.

**Type of Organization:**
- nonprofit organization
- community mental health and training clinic

**Ages served:**
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)

**Staff:**
- 17 part-time employees including doctoral trainees and master’s level graduates working on doctorates.

**Languages spoken:**
- English

**Services:**
- program/case consultation
- mental health intervention
- direct therapy with children
- child-parent therapy
- therapeutic play groups
- assessment

**Length of services:**
- short-term, goal-oriented
- on-going, long-term

**Child care programs served:**
- various

**Funding sources:**
- Alameda County ACCESS
- Alameda County Behavioral Health Care Services Agency
- Medi-Cal
- Schools/School districts/other agencies
- clients on a sliding scale

**Contact:**
Intake Coordinator at (510) 628-9065, ext. 234
CALIFORNIA
MADELINE MEYER RILEY
2012 Tiffin Road, Oakland, CA 94602

Type of Organization:
- private practice

Staff:
- 1 part-time licensed marriage-family therapist who has worked in the child care field and has play therapy training.

Services:
- general training on child development
- staff development
- program/case consultation
- early referral
- mental health intervention
- direct therapy with children

Length of service:
- short-term, goal-oriented
- on-going, long-term

Ages served:
- infants (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)

Languages spoken:
- English

Child care programs served:
- Family Child Care or Centers

Funding sources:
- Family Child Care or Centers

Contact:
Madeline Meyer Riley, LMFT (510) 331-8173
Type of Organization:
• private practice

Staff:
• 1 full-time marriage-family therapist.

Services:
• program/case consultation
• direct therapy with children
• child-parent therapy
• parenting therapy
• parent support groups

Length of service:
• short-term, goal-oriented
• on-going, long-term

Ages served:
• infants (0-18 months)
• toddlers (18-36 months)
• preschool age (3-5 years)
• school age (5+ years)

Languages spoken:
• English
• Farsi
• Spanish

Child care programs served:
• Head Start in East Oakland (San Antonio Park and San Antonio-CVC sites)

Funding sources:
• Medi-Cal
• Health Families
• Value Options
• VOC (trauma related)

Contact:
• Roya Sakhai
  (510) 451-0661
Building Blocks Therapeutic Nursery Center is an early intervention program which provides therapeutic and educational services to children with behavioral and emotional problems.

**Type of Organization:**
- nonprofit organization

**Staff:**
- 5 full-time therapists, 3 full-time teachers and 5 mental health assistants who serve 24 children at Building Blocks, a Seneca Preschool Day Treatment Program.

**Services:**
- general training on child development
- staff development
- program/case consultation
- early referral
- mental health intervention
- direct therapy with children
- child-parent therapy
- parent support groups
- family support services
- therapeutic preschool
- therapeutic play groups

**Length of service:**
- on-going, long-term

**Ages served:**
- preschool age (3-5 years)
- school age (5+ years)

**Languages spoken:**
- English
- Spanish
- Korean
- French

**Child care programs served:**
- Building Blocks

**Funding sources:**
- Medi-Cal

**Contact:**
- Margie Craig (510) 434-7990
THE LINK TO CHILDREN
1530 Euclid Avenue, Berkeley, CA 94708

The Link to Children promotes the health emotional development of young children so that they will be able to learn even in difficult times and under difficult circumstances.

Type of Organization:
- nonprofit organization

Staff:
- 5 post-masters interns with a minimum of 500 hours, serving approximately 10 families a week. Each is under the supervision of a licensed expert in early childhood mental health.

Services:
- staff development
- program/case consultation
- mental health intervention
- direct therapy with children
- parent support groups
- social skills groups
- parent empowerment groups
- parent counseling

Length of service:
- short-term, goal-oriented
- on-going, long-term

Ages served:
- infants (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)

Languages spoken:
- English
- Spanish

Child care programs served:
- St. Vincent's
- Emeryville Child Development Center
- Franklin CD, Berkeley
- Centro Vida/ Bahia
- Association of Children's Services

Funding sources:
- San Francisco Foundation
- Y and H Soda
- Every Child Counts
- Stulsaft

Contact:
- Grace Manning-Orenstein (510) 261-9586
Through the Looking Glass is a community organization which has pioneered clinical and supportive services, training and research serving families in which one or more members, whether parent or child, has a disability or medical issue. Their mission, since 1982, has been to create, demonstrate and encourage non-pathological and empowering resources and model early intervention services for families with disability issues. They integrate expertise derived from personal disability experience and disability culture.

**Type of Organization:**
- nonprofit organization
- disability-based community-service organization

**Services:**
- evaluation/assessment
- program/ case consultation
- case management
- early referral
- crisis referral
- home visiting
- direct therapy with children
- child-parent therapy
- parenting therapy
- parenting education
- parent support groups
- family support services
- family therapy
- therapeutic play group
- training for mental health professionals
- training for mental health interns
- training for non-mental health service providers
- infant/toddler developmental intervention
- infant mental health work
- disability adaptations for infants or parents with disabilities
- supervision for staff

**Length of service:**
- short-term, goal-oriented
- on-going, long-term

**Staff:**
7 full-time employees and 13 part-time employees including 3 licensed psychologists, 4 psychologists, 2 licensed marriage family therapists, 1 licensed social worker, 2 social workers, 7 master's level graduates, and 10 developmental specialists.

**Ages served:**
- infants (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)

**Languages spoken:**
- English
- Spanish
- Korean
- French
- American Sign Language

**Child care programs served:**
- Consultation and training as needed

**Funding sources:**
- Regional Center of the East Bay
- Every Child Counts
- City of Berkeley
- Trio Foundation
- Children's Support League
- grants to fund parenting assistive technology

**Contact:**
- Megan Kirshbaum (510) 848-1112
West Coast Children’s Center is a licensed community psychology clinic. West Coast is committed to training mental health professionals.

**Type of Organization:**
- local behavioral health agency
- nonprofit organization
- community mental health clinic

**Staff:**
- 6 part-time employees including 3 licensed psychologists and 3 interns.

**Services:**
- evaluation/assessment
- case consultation
- direct therapy with children
- child-parent therapy
- parenting therapy
- therapeutic play groups
- training for mental health interns
- family support services
- crisis referral
- case management
- supervision

**Length of service:**
- short-term, goal-oriented
- on-going, long-term

**Ages served:**
- preschool age (3-5 years)
- school age (5+ years)

**Languages spoken:**
- English
- Spanish

**Child care programs served:**
- Oxford Elementary
- Ecole Bilingue De Berkeley

**Funding sources:**
- private donations
- county mental health funds

**Contact:**
- Dr. Paul Moore (510) 527-7249
XANTHOS, INC.
2325 Clement Avenue, Alameda, CA 94501

Xanthos Inc. has a mental health component, Alameda Family Service, which serves individuals, couples, and families with counseling concerns. We offer specialized services, such as child therapy, status offender prevention services, and training opportunities for mental health professionals.

Type of Organization:
- nonprofit organization
- community mental health clinic

Staff:
4 licensed psychologists, 1 LCSW child therapist, 2 registered psychologists, 2 case managers, 3 pre-doc interns and 5 practicum students. Staff may be full-time and part-time.

Services:
- Evaluation and assessment
- Case consultation
- Child therapy
- Family therapy
- Adult therapy
- Group therapy (adult, child, adolescent)
- Parenting classes
- Parenting support group
- Case Management
- Supervision
- Crisis Intervention
- Training for mental health interns
- Adolescent therapy
- Anger management
- Substance abuse services

Ages served:
- infants (0-18 months)
- toddlers (18-36 months)
- preschool age (3-5 years)
- school age (5+ years)
- all ages

Languages spoken:
- English
- Depending on staff proficiency, Spanish and Mandarin

Child care programs served:
- Alameda Head Start

Funding sources:
- Private donations
- County mental health funds
- Federal, state and local grants/contracts

Contact:
- Helen Birch, Program Director (510) 522-8363, ext. 142