

Center of
Excellence for Infant and Early
Childhood Mental Health
Consultation Competencies



CENTER OF EXCELLENCE FOR
Infant & Early Childhood
Mental Health Consultation
Growth. Advancement. Impact.

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INFANT AND EARLY CHILDHOOD MENTAL HEALTH CONSULTATION—COMPETENCIES

Over the last decade, infant and early childhood mental health consultation (IECMHC) has emerged as an effective and evidence-based strategy to promote infants' and young children's positive social and emotional development and behavioral health. IECMHC has also been shown to play an important role in helping to prevent, identify, and reduce the impact of mental health problems among infants, young children, and their families. And it has the potential to reduce racial/ethnic, gender, language, or disability-based disparities in infant and young child outcomes, which are undergirded by inequitable distribution of opportunity, by supporting those who make decisions about infants and children. IECMH consultants work not only with individual infants and young children but also with programs or settings as a whole, by focusing on issues that affect the program's or setting's overall quality and equity. And they also work within and across systems serving infants, young children, and families.

Increasingly, states, tribes, communities, programs, and other settings have adopted IECMHC in early care and education (ECE) settings as well as in other settings typically frequented by infants, young children, and their families (e.g., pediatric settings, hospitals, homeless shelters, child welfare programs). Several states, tribes, and regions have a long history of successfully implementing IECMHC and have developed their own guidelines related to job-specific qualifications, education, and training. As the field expands, there is a growing need and desire for a national consensus on IECMHC competencies that explicitly focus on building more equitable systems for all young children.

Georgetown University Center for Child and Human Development (GUCCHD) faculty and colleagues developed the first version of IECMHC national competencies in 2015

with funding from a training and technical assistance (T/TA) grant from the Office of Head Start, provided under the auspices of the National Center on Health. GUCCHD produced a second version as part of the first Center of Excellence for IECMHC. The IECMHC competencies presented here represent an updated version of national competencies for IECMH consultants. The 2020 competencies have been reviewed by a wide range of professionals in the field, and the content of the 2015 competencies has been updated and edited.

These competencies represent an important step toward building a national consensus on the knowledge and the array of foundational skills and abilities needed to become a competent IECMH consultant. They were originally developed primarily for IECMHC in ECE and home visiting (HV) programs, but they can and should be used in other settings where IECMHC occurs (e.g., pediatric settings, hospitals, homeless shelters, child welfare programs).

We recommend using the competencies in two ways: (1) to supplement or extend guidelines and expectations within established local or statewide IECMHC programs engaged in building an equity-focused, qualified IECMHC workforce and (2) in new efforts to create IECMHC programs to support building the IECMHC workforce in places where one does not yet exist. In addition, the competencies may help to further distinguish guidelines for the field of IECMHC from those that have been developed for other fields, such as infant mental health,¹ and to clarify the difference between IECMHC and other types of services offered that support infants, young children, and families.²

¹ Korfmacher J. 2014. *Infant, Toddler, and Early Childhood Mental Health Competencies: A Comparison of Systems*. Washington, DC: Zero to Three.

² U.S. Department of Health and Human Services, Administration for Children and Families. N.d. *A Guide to Effective*

THESE IECMHC COMPETENCIES MAY ALSO HELP:

Influence

the hiring, supervision, and evaluation of IECMH consultants.

Guide

professional development, training, and coursework.

Enhance

quality and increase professional credibility of IECMHC.

Encourage awareness of the importance of racial equity at all levels of IECMHC.

These newly developed IECMHC competencies describe a distinct specialization that combines both infant and young child mental health competencies and other consultation competencies. They represent the most up-to-date compendium of attributes, knowledge, and skills needed to become a competent IECMH consultant. These competencies have been reviewed using an equity rubric to help ensure they equip consultants with the knowledge and competencies they need to address systemic racism and inequitable distribution of opportunity. Ultimately, through refinements over time, they may be used to increase clarity in the field, resulting in specialized training and enhanced or new financing mechanisms to support IECMHC in a variety of settings serving infants, young children, and families. The competencies may also be the first step toward developing a national credentialing system and academic programs specifically designed to train IECMH consultants.

COMPETENCIES AT A GLANCE

Categories

Summary of IECMH Consultant Skills

ROLE OF THE IECMH CONSULTANT

Understands and can convey how IECMHC is a mental health specialization and service that is distinct from other activities in which mental health professionals may engage.

Demonstrates an ability to strengthen the capacity of staff working in programs and other settings serving infants, young children, and families to support the social, emotional, and relational health of infants, young children, and families in a range of settings. (In the context of this document, unless otherwise noted “relational health” describes the mutual emotional connections established by healthy interactions between or among infants or young children, early childhood providers, caregivers, family members, and program and other setting staff that contribute to infants’ or young children’s overall mental and physical well-being.) Partners with families and staff in working to prevent mental health problems from developing or worsening and/or in responding effectively to existing mental health concerns. Partners with staff and program or other setting and systems leaders to build more equitable systems by addressing implicit bias, increasing positive relationships between early childhood providers and infants and children with different abilities and from diverse racial/ethnic and language backgrounds,

ROLE OF THE IECMH CONSULTANT (CONT.)

monitoring and using disaggregated data to reduce disparities, and developing and implementing new policies that support positive and equitable experiences for all young children.

FOUNDATIONAL KNOWLEDGE

Draws from a broad and diverse knowledge base to understand infants, young children, families, and staff with different abilities and from diverse racial/ethnic and language backgrounds, and how they relate to one another. Turns to a variety of disciplines and theories to inform the direction of consultation.

EQUITY AND INCLUSION

Understands broad and local historical and systemic dynamics that have generated racialized disparities in outcomes for infants, young children, and families. Works with others to improve their understanding of how infant, young child and adult race/ethnicity, primary language, culture (beliefs, values, voice, communication style, behavioral norms, and attitudes), abilities, biases, disposition, and life circumstances (e.g., poverty and domestic violence) impact the learning environment. Additionally, understands how adult-infant/young child interactions shape the quality of relationships, infants' and young children's learning experiences, and disciplinary decisions but also how contextual variables such as community context, history, and systems shape adults' and infants'/young children's experiences. Explicitly and intentionally acts on this understanding to create equitable and positive experiences for all infants and young children, including those from historically marginalized and oppressed communities.

REFLECTIVE PRACTICE

Thinks about and questions personal biases, assumptions, and experiences before, during, and/or after consultative interactions. Considers the influences on and perspectives of others (e.g., infant, young child, family, staff) in the context of consultation, including how these may vary based on infant, young child, family, staff, and consultant ability, race/ethnicity, and language background (i.e., "what might this experience have been like for the infant, young child, staff member, or caregiver?"). Promotes reflective practice with consultees, using this experience-based learning to support consultees' professional growth and development. Commits to a journey of ongoing self-exploration to understand how one's culture, background, race, and other social identities (including issues related to privilege and power) impact the way IECMH consultants see themselves and others.

CHILD- AND FAMILY-FOCUSED CONSULTATION

Collaborates with families and/or program or other setting staff to understand and respond effectively to an infant's or young child's mental health needs, behavioral difficulties, and/or developmental challenges or to a caregiver's mental health needs. Partners respectfully with families and staff to understand

**CHILD- AND
FAMILY-FOCUSED
CONSULTATION
(CONT.)**

the context and nature of a particular family's life to enhance the infant's, young child's and family's well-being. Takes time to understand how race/ethnicity, primary language, culture, abilities, disposition, and life circumstances (e.g., poverty and domestic violence) influence the infant's, young child's, or family's experiences and the program's or other setting's and system's role in hindering or supporting wellness. Resists applying a deficit-based perspective to infants, young children, and families who are from historically marginalized and oppressed communities by committing to learn about authentic community strengths and adaptive responses to poverty, historical trauma, and other racialized experiences.

**CLASSROOM- AND
HOME-FOCUSED
CONSULTATION**

Collaborates with families and program staff to promote equitable, warm, and trusting relationships, consistent routines, and development-enhancing interactions that positively impact program and home climates. Understands and values the roles that race/ethnicity, primary language, culture, abilities, disposition, and life circumstances play in supporting infants' and young children's social and emotional development and incorporates a family's culture and primary language into non-home settings to build continuity for infants and young children into their experiences at home and in other settings (e.g., classrooms).

**PROGRAMMATIC
CONSULTATION**

Maintains a systemic approach and aims for program-wide impact through a focus on multiple issues that affect the overall quality and equity of programs or settings serving infants, young children, and families. Works to enhance programmatic functioning by assisting program administrators and/or staff in considering the program's or setting's overall social and emotional climate; solving issues that affect more than one infant or young child, staff member, and/or family; collecting and using disaggregated data to track program-wide disparities in both opportunity and the ways in which young children are disciplined, and supporting the development and implementation of policies that create more equitable experiences for infants, young children, and families.

**SYSTEMS-WIDE
ORIENTATION**

Works within and across systems, integrating equity and mental health concepts and supports into the environments where infants and young children spend time. Maintains awareness of the systems within which IECMH occurs, and considers these contexts when seeking to understand factors that promote or hinder the process of change. Works to strengthen bridges between systems serving infants, young children, and families to facilitate access to comprehensive and integrated care.

1. ROLE OF THE IECMH CONSULTANT

Understands and can convey how IECMHC is a mental health specialization and service that is distinct from other activities in which mental health professionals may engage. Demonstrates an ability to strengthen families' and program or other setting staff's capacity to support the social, emotional, and relational health of infants, young children, and families in a range of programs or other settings. Partners with families and early childhood providers in working to prevent mental health problems from developing or worsening and/or in responding effectively to existing mental health concerns. Partners with staff, program or other setting, and systems leaders to build more equitable systems for infants and young children by addressing explicit and implicit bias, increasing positive relationships between early childhood providers and infants and young children with different abilities and from different racial/ethnic and language backgrounds, monitoring and using disaggregated data to reduce disparities, and developing and implementing policies that support positive and equitable experiences for all young children.

1A. Distinguishes IECMHC from Other Related Endeavors

Core IECMH Consultant Skills

1A.1.

Demonstrates an understanding of IECMHC as an indirect service that helps to build the reflective capacities and relational health of families; staff who work in programs or other settings serving infants, young children, and families; and others who care for or provide services to infants and young children. Grasps and can convey the difference between IECMHC and other modes of intervention that involve direct mental health treatment for infants, young children, and/or families.

1A.2.

Understands and can convey the distinction between the role of the IECMH consultant and that of other professionals who support the development of early childhood staff and family capacities (e.g., professional development coaches, health service managers, healthcare consultants, home visitors, early interventionists, therapists, disability coordinators, pediatricians, foster care case workers).

1A.3.

Embraces the idea that IECMHC focuses on promoting infants' and young children's positive social and emotional development and behavioral health and reducing racial/ethnic, gender, language, or disability-based disparities in infant and young child outcomes using a wide-ranging knowledge base that draws from numerous fields of study.

1B. Exhibits an Ability to Work in Natural Settings

Core IECMH Consultant Skills

1B.1.

Demonstrates an ability to work in diverse early childhood programs or other settings.

1B.2.

Considers the influence of program or other setting and organizational functioning on early childhood providers, families, infants and young children, and service provision and how this may differ based on race/ethnicity, primary language, or abilities.

1B.3.

Suggests and/or supports interventions that align with the particular program or other setting in which IECMHC is delivered, which may include programmatic and/or infant- or young child- and family-specific activities.

1B.4.

Offers consultation that reflects and respects the philosophy and model of the program or other setting in which IECMHC is delivered and the community, cultural, and historical contexts in which that program or other setting is located and/or functions.

1C. Understands and Engages in the Consultative Process

Core IECMH Consultant Skills

1C.1.

Demonstrates an organized approach to the stages of the consultative process (e.g., entering the new environment, establishing mutual expectations for the work, gathering information from and considering the perspectives of all involved, facilitating the establishment of goals, supporting and assessing progress, righting the course of consultation when necessary, transitioning, ending).

1C.2.

Demonstrates an ability to support the emotional well-being and relational health of infants and young children and their caregivers, and promotes a shared and accurate understanding of infant, young child, family, and provider needs. Demonstrates an understanding of how needs may vary based on families' experiences with racial/ethnic, language, or ability inequities.

1C.3.

Maintains accurate and timely records, provides professional documentation, and engages in substantive disaggregated data collection in accordance with a program's or other setting's requirements.

1C.4.

Recognizes when additional mental health and/or other services are warranted, and is able to make culturally responsive, appropriate, and effective referrals across multiple systems.

1D. Embraces the Consultative Stance and Reflective Practice

Core IECMH Consultant Skills

1D.1.

Can articulate the elements of the “consultative stance,”³ and demonstrates the demeanor and skills embodied by this stance.

1D.2.

Demonstrates the ability to engage in a flexible and varied “use of self” based on the unique needs of a program or other setting, its context, and the relationships involved (i.e., in a range of situations, is able to serve as an observer, listener, facilitator, problem-solver, and/or educator).

1D.3.

Understands implicit bias and systemic racism and their manifestations, and how they affect adult behavior and the experiences of infants, young children, and families from historically marginalized and oppressed communities. Explores how principles of racial equity are inextricably linked and aligned to the 10 elements of the consultative stance.

1D.4.

Recognizes and maintains appropriate professional boundaries and role as defined by discipline (e.g., psychology, social work, counseling) and scope of practice.

³Johnston K, Brinamen C. 2006. *Mental Health Consultation in Child Care: Transforming Relationships with Directors, Staff, and Families*. Washington, DC: Zero to Three Press.

1E. Deepens Knowledge and Skills Through Active Participation in Supervision or Consultation

Core IECMH Consultant Skills

1E.1.

Actively participates in clinical consultation and/or reflective supervision that includes:

Analysis of the dynamic interactions between participants (e.g., family members, teachers, administrators, early childhood providers, consultants, institutions).

Analysis of how race/ethnicity, primary language, culture, abilities, disposition, and life circumstances influence those interactions.

Engagement in explorations of the possible challenges to developmentally supportive activities.

1E.2.

Participates in regular administrative supervision that includes broad discussion of job-related responsibilities, work quality, documentation, disaggregated data collection, data collection, and other related issues.

1F. Adheres to Ethics and Standards of Professional Conduct

Core IECMH Consultant Skills

1F.1.

Adheres to the ethics and standards of professional conduct (e.g., the National Association of Social Workers' Code of Ethics), and, if licensed, adheres to the requirements for maintenance of licensure.

1F.2.

Discusses confidentiality and the limits of confidentiality with program or other setting staff and families at the start of services, and, as circumstances indicate, revisits these topics during the course of consultative work.

1F.3.

Carries out the mandate to report suspected child abuse and neglect, and supports others in their responsibilities as mandated reporters.

1F.4.

Seeks continuing education experiences to enhance knowledge and skills, and stays apprised of new research, scholarship, and promising practices in IECMHC.

1F.5.

Understands and explores how IECMHC aligns with the Diversity-Informed Tenets for Work with Infants, Children and Families.⁴

1G. Collaborates Respectfully with Other Agencies

Core IECMH Consultant Skills

1G.1.

Establishes and maintains partnerships with programs and agencies within the community serving infants, young children, and families (e.g., Early Head Start, Head Start, child care, family support, early intervention, mental health treatment, child welfare) to collaborate on behalf of infants, young children, and families.

1H. Explicitly and Intentionally Promotes Equity—from the Individual Level to the Systemic Level

Core IECMH Consultant Skills

1H.1.

Partners with staff, program, other setting, and systems leaders to build more equitable systems for infant and young children by understanding the role and importance of ongoing personal transformation; discussing explicit and implicit bias and intervening to address its behavioral manifestation; increasing positive relationships between early childhood providers, infants, young children, and families with different abilities and from different racial/ethnic and language backgrounds; continuously monitoring and using disaggregated data to identify and address disparities; and advocating for and supporting the implementation of policies that support positive and equitable experiences for all infants and young children.

⁴ Irving Harris Foundation, 2018 [Diversity-Informed Tenets for Work with Infants, Children and Families](https://diversityinformedtenets.org/). Chicago, IL: Irving Harris Foundation. [[Designer: Link Diversity-Informed Tenets for Work with Infants, Children and Families to <https://diversityinformedtenets.org/>]]

2. FOUNDATIONAL KNOWLEDGE

Draws from a broad and diverse knowledge base to understand infants, young children, families, and program or other setting staff from diverse racial/ethnic and language backgrounds, and how they relate to one another. Turns to a variety of disciplines and theories to inform the direction of consultation.

2A. Understands the Multidisciplinary Body of Knowledge that Informs Consultation

Core Skills

2A.1.

Appreciates and embraces multidisciplinary approaches to working with infants, young children, families, caregivers, and staff who work in programs or other settings serving infants, young children, and families, drawing on areas of study that include: professional consultation, mental health, early education, early childhood development, infant and early childhood mental health, family and/or systems functioning, culture, race and equity and anti-racism approaches.

2A.2.

Understands that an infant's or young child's physical environment, experience of attachment, social relationships, race/ethnicity, primary language, culture, abilities, disposition, and life circumstances all impact behavior and social and emotional well-being. Uses this knowledge to support change in one or more of these realms to improve infant and young child outcomes.

2A.3.

Understands mental health concepts and psychological processes related to adults and adult functioning, including how caregivers' current and historical access to opportunities and resources and their experiences with discrimination impact mental health. Understands parallel process (i.e., how relationships between an IECMH consultant and staff or caregivers impacts relationships between staff or caregivers and infants, young children, and families), the ways in which a caregiver's experiences can affect their interpretation of an infant's or young child's behavior, and experiences with or responses to trauma.

2A.4.

Understands the impact of trauma (including racialized, historical trauma and family violence) on infant/young child and family development and can educate others about trauma-informed approaches as needed.

2A.5.

Understands the impact of systemic racism, discrimination, and individual prejudices and microaggressions on infants', young children's, and families' experiences, and can educate others about anti-racism approaches.

2A.6.

Understands how caregiver attitudes and behaviors influence infants and young children, and works to ensure that caregivers understand the potential consequences of their attitudes and behaviors.

2A.7.

Understands the root causes of the disparities in the ways that infants and young children are disciplined. Understands how bias and applying a deficit-based perspective influence perceptions of infant and young child behavior; disciplinary decisions; and infant, child, and family well-being.

2A.8.

Has broad knowledge of culturally responsive social and emotional curricula, screening tools, frameworks, and resources, and understands equitable implementation of such curricula and tools.

2A.9.

Understands adult learning theory (i.e., concepts related to how adults learn best) as it relates to families and staff.

2A.10.

Understands basic principles of organizational or systems psychology as they relate to the programs or other settings in which consultation takes place.

2A.11.

Recognizes and respects child and family culture, families' knowledge, sources of strength and resilience, and routes to healing within diverse families and communities.⁵

⁵ Irving Harris Foundation, 2018. [Diversity-Informed Tenets for Work with Infants, Children and Families](#), Chicago, IL: Irving Harris Foundation.

2B. Understands the Nature of and Influences on Development

Core Skills

2B.1.

Understands the importance of developing self-regulation, social relationships, communication, representational thinking, and executive function abilities for school readiness.

2B.2.

Understands the interplay of genes and experiences on development—that both the infant's or young child's constitutional nature (including temperament) and aspects of the environment (e.g., the functioning of caregivers, the presence of risk and protective factors) play a role in determining the course of development. Understands the impact of experiences of prejudice or discrimination.

2B.3.

Understands that development is a transactional phenomenon, within which infants and young children experience attachment relationships with primary caregivers that play a critical foundational role in development. Understands the potential negative impact of caregiver history, multiple separations, relational disruptions, caregiver depression, and loss.

2B.4.

Understands the potentially positive and protective role of grandparents and extended family, siblings, peers, and group interactions on early development and emotional well-being.

2B.5.

Understands typical and atypical growth and development of infants and young children. Has an in-depth knowledge of the general sequence of developmental milestones in all domains, including those connected to cognitive and social and emotional development, communication, sensory-motor processing, self-regulation, physical development, and play.

2B.6.

Recognizes risk factors associated with trauma as they relate to environmental, situational, and interpersonal contexts and understands the role of protective factors in ameliorating impacts on infant and early childhood development.

2B.7.

Understands the many ways in which current and historical inequities (racism, homophobia, sexism, able-ism, and other forms of systemic oppression) can negatively impact families' access to resources, adult-infant/young child relationships, and infant and early childhood development.

2C. Understands the Importance and Power of Culture

Core Skills

2C.1.

Understands and supports cultural variations in development, child-rearing practices, and caregiver expectations.

2C.2.

Recognizes the biological, psychological, social, and spiritual context of culture and its influence on values, beliefs, child-rearing practices, infant and early childhood development, and social and emotional health and well-being.

2D. Understands the Importance of Self- Awareness and the Nature of Reflective Practice

Core Skills

2D.1.

Understands the importance of examining values, beliefs, privilege, biases, assumptions, and experiences to ensure that misinterpretation or judgment is not imposed on others' intentions and actions.

2D.2.

Understands the impact of unconscious bias on interpersonal interactions and decision-making.

2D.3.

Understands the importance of assisting others in reflecting on and examining their own values, beliefs, privileges, biases, assumptions, and experiences; supporting them in regulating their emotions; and helping them accurately perceive the meaning of others' behavior (specifically, the behavior of infants, young children, families, and co-workers).

2D.4.

Recognizes the value of using self-reflection to maintain awareness of thoughts, emotions, and visceral reactions in responses to consultees and families and the importance of understanding these thoughts, emotions, and reactions as personal information to be processed and explored.

2D.5.

Embraces the importance of seeking to understand the perspectives and experiences of others in the context of consultation.

2D.6.

Understands the importance of clinical supervision, consultation, and reflective supervision and values them as critical components that support the provision of effective consultation.

2E. Understands the Functioning of and Relationships Between Families, Caregivers, IECMH Consultants, and Systems

Core Skills

2E.1.

Understands the value of support networks. Recognizes barriers and challenges to service acquisition for families, especially those who are isolated or face discriminatory practices due to race/ethnicity, disability, language, or immigration status.

2E.2.

Understands parallel process (i.e., how the relationship between an IECMH consultant and staff or caregivers impacts relationships between staff or caregivers and infants or young children and families).

2E.3.

Understands that the quality of relationships among adults (between staff members and/or between staff members and families) influences infants' and young children's experiences.

2E.4.

Understands the importance of self-care and the value of offering information to families and staff on the connection between self-care and the ability to build successful relationships with others.

3. EQUITY AND CULTURAL SENSITIVITY

Describes and demonstrates how culture, equity, and environment shape relationships and behaviors and influence settings and communities in important and meaningful ways. For more information, please see the Equity section of the website.

3A. Demonstrates an Awareness of Race and Racism, Cultural Variation, and Normative Differences in Family Structure

Core Skills

3A.1.

Understands how systemic racism, discrimination, and individual prejudices and microaggressions affect infant, young child, and family well-being.

3A.2.

Understands how culture shapes interactions and relationships, family structures, behaviors, and development.

3A.3.

Can define and demonstrate cultural sensitivity (including an understanding of issues related to the languages that young children and families speak), and is able to describe its relevance to IECMHC. Appreciates culture and resilience as sources of strength.

3A.4.

Demonstrates an appreciation of the unique values and beliefs of each family and each family's structure, and can work effectively with infants, young children, and families from a range of backgrounds.

3A.5.

Demonstrates the skills to identify and address implicit bias in practice. Identifies and can effectively discuss program, other setting, local, state, or other system policies that disproportionately disadvantage one group of young children or families (including disciplinary policies and policies that discriminate against young children and families who do not speak English).

3A.6.

Can identify specific strategies to address inequities in practice and in policy. Can support others' efforts to recognize and address inequities.

3A.7.

Demonstrates the ability to explore and negotiate cultural differences, to value and adapt to the diverse cultural contexts of programs or other settings and communities served, and to work effectively with individuals, groups, organizations, and systems that vary in cultures, values, beliefs, privilege, biases, and experiences.

3B. Demonstrates Self-Awareness

Core Skills

3B.1.

Explores own and others' values, beliefs, backgrounds, privilege, biases, assumptions, and experiences in a way that enhances the effectiveness of consultation in diverse communities.

3B.2.

Demonstrates the capacity for self-awareness as it relates to bias, privilege, deficit-based perspectives of families and infants and young children, and other cultural issues (i.e., the ability to recognize how culturally influenced experiences shape personal and professional behavior and attitudes, including those connected to how interactions with others unfold and are perceived).

3B.3.

Demonstrates the capacity to address such biases and deficit-based perspectives. Is alert to discomforts and emotional responses when cultural, race, and diversity issues arise.

3B.4.

Demonstrates the ability to recognize personal limitations in knowledge of particular cultures, and seeks to learn more about different cultures.

3C. Promotes Cultural Responsiveness in Practices, Policies, and Procedures

Core Skills

3C.1.

Supports staff in speaking with families in their preferred language and in using culturally responsive professional interpreters when same-language communication is not an option.

3C.2.

Works with programs and other settings to promote cultural sensitivity so that language and culture are respected, families are provided with culturally and linguistically appropriate materials, and staff are offered training opportunities focused on increased cultural responsiveness.

3C.3.

Supports the capacity of others to work cross-culturally with the goal of positively influencing practice, policymaking, administrative functioning, and service delivery. Works to systematically involve families, key stakeholders, and communities in these efforts.

4. REFLECTIVE PRACTICE

Thinks about and questions personal influences and actions before, during, and/or after consultative interactions. Considers the influences on and the perspectives of others (e.g., infant, young child, family, staff) in the context of consultation, including how these may vary based on infant or young child, family, staff and consultant abilities, race/ethnicity, and language background (i.e., “What must this experience have been like for the infant or young child, staff member, or caregiver?”). Promotes reflective practice with consultees, using this experience-based learning to support consultees’ professional growth and development. Commits to a journey of ongoing self-exploration to understand how one’s own cultural background, race, and other social identities (including issues related to privilege and power) impact the way IECMH consultants see themselves and others in the work.

4A. Uses Self-Reflection to Enhance Consultation

Core Skills

4A.1.

Understands, can describe, and values the importance and benefits of reflective practice.

4A.2.

Regularly reflects on values, beliefs, biases, assumptions, and experiences as they influence interactions, relationships, and the directions that consultation may take.

4A.3.

Reflects on biases and can recognize when biases may negatively impact effective consultation. Works to explore personal implicit biases, and takes steps to make objective decisions.

4A.4.

Reflects on culture, values, beliefs, backgrounds, privilege, biases, assumptions, and experiences, including the impact of experience with racism, classism, sexism, able-ism, homophobia, xenophobia, and/or other systems of oppression to provide diversity-informed and culturally attuned services.⁶

⁶ Irving Harris Foundation. (2012). Diversity-Informed Infant Mental Health Tenets. Retrieved from <https://imhdivtenets.org/tenets/>

4A.5.

Uses self-reflection to maintain awareness of thoughts, emotions, and visceral reactions that regularly inform and can enhance the quality of consultative work.

4A.6.

Reflects on and explores a wide variety of approaches to working with staff, families, and infants or young children, and understands that there is no single correct strategy (or any quick fixes) when it comes to change and growth.

4A.7.

Explores and reflects on views and values related to equity-related, and particularly racial-equity-related, issues and how these views' influence individuals, organizations, and systems.

4A.8.

Reflects on and utilizes “location of self” (i.e., acknowledging our multiple selves and how we make them explicit) orientation by reflecting with supervisor and colleagues on how one’s cultural identities (e.g., gender, race, class, religion, sexual orientation, immigration status) might influence consultative relationships.

4B. Assists Others in Reflecting

Core Skills

4B.1.

Encourages staff and families to become aware of behaviors that stir up strong feelings and reactions, and assists them in identifying the origins of those feelings and reactions so that they can respond to families, caregivers, and/or infants and young children compassionately and effectively.

4B.2.

Supports staff and families in understanding how their values, beliefs, backgrounds, privilege, biases, assumptions, and experiences—along with factors connected to specific settings—play a role in influencing infants and young children’s behavior.

4B.3.

Seeks to engender curiosity through carefully timed, nonjudgmental inquiry. Uses listening, patience, and reflection to encourage others to explore possibilities for approaching challenges and supporting growth and well-being.

4B.4.

Collaborates with others to explore how they can regulate their emotions, engage in self-care, reduce stress, strengthen coping mechanisms and resilience, and aim for life balance even in the face of difficult circumstances.

4B.5.

Provides individual and group opportunities for staff to engage in reflection as it relates to values, beliefs, backgrounds, privilege, biases, assumptions, and experiences when they are working in a supportive role with families.

4B.6.

Assists others in reflecting on the strengths and limitations of the program or other setting in which they work or live (e.g., agency, classroom, program, other setting, home) and to explore how that program or other setting impacts possibilities for and approaches to supporting children, families, and staff.

4B.7.

Supports others' (including colleagues' and consultees') developing capacities to explore equity issues and their influence in the population IECMH consultants serve as well as the role consultants play in upholding or dismantling inequitable systems and practices. Encourages deep conversations about race, diversity, and inclusion to raise awareness and to support equity in all work interactions.

4B.8.

Reflects with supervisor and colleagues on how to leverage opportunities to be a voice for equity in one's own organization and in the broader community.

5. CHILD AND FAMILY-FOCUSED CONSULTATION

Collaborates with families and/or program or other setting staff to understand and respond effectively to an infant's, young child's, or caregiver's mental health needs, behavioral difficulties, and/or developmental challenges. Partners respectfully with families and staff to understand the context and nature of a particular family's life to enhance the infant's or young child's and family's well-being.

5A. Values and Promotes the Power of Relationships and the Importance of Relationship-Building

Core Skills

5A.1.

Demonstrates an ability to honor family strengths, perspectives, and expertise, and assists others in valuing and supporting family relationships as the first and primary relationships in an infant's or young child's life.

5A.2.

Supports program or other settings staff in developing trusted and respectful relationships with families.

5A.3.

Gathers(or supports staff in helping to gather) family- and infant- or young-child-related information in a manner that is nonthreatening, respectful, collaborative, and supportive.

5A.4.

Facilitates understanding, mutual respect, and direct communication between families and staff and among members of the early childhood community.

5A.5.

Engages warmly and flexibly with ECE/HV staff and families to consider the meaning of a particular behavior.

5B. Works Collaboratively to Understand an Infant's and Young Child's Behavior

Core Skills

5B.1.

Collaborates with families and staff to develop a working hypothesis about the meaning of an infant's or young child's behavior, including social and emotional, relational, cultural, and family factors; physical and/or medical issues; environmental factors and events (such as a history of exposure to trauma); and/or developmental vulnerabilities that may play a role in that behavior. Recognizes the need to revise the hypothesis over time as new information emerges and in the face of conflicting and/or additional information.

5B.2.

Demonstrates an ability to pay close attention to relationships and interactions between staff, family members, and the infant or young child—and between that infant or young child and his or her peers—and to consider how those interactions may impact infant or young child and family well-being.

5B.3.

Considers and encourages others to consider information from families (including information about family history and culture), from staff and from observations and documentation (e.g., health records, anecdotal notes, assessments, reports).

5B.4.

Uses a variety of observation strategies, tools, and recording techniques to gain insight into an infant's or young child's behavior and the relational influences on their functioning.

5B.5.

Helps families and staff understand all influences on their view of the infant or young child (e.g., cultural, historical, and interpersonal factors; exposure of the infant, young child, or family to trauma; programmatic issues).

5C. Supports and Facilitates Plan Development and Implementation Child's Behavior

Core Skills

5C.1.

Integrates information and, considering both context and available resources, collaborates with staff and families to develop a plan that addresses infant or young child, family, and staff needs in a culturally sensitive manner. demonstrates the demeanor and skills embodied by this stance.

5C.2.

Assists and supports families and staff so that collaboratively developed plans for infants or young children involve interventions that reflect best practice (i.e., are developmentally appropriate and, when possible, evidence-based).

5C.3.

Works in collaboration with other service providers to support families and staff (e.g., Part C, Early Intervention).

5D. Supports and Facilitates Referrals, Service Provision, and Community Collaboration

Core Skills

5D.1.

Partners with staff and families to identify and facilitate appropriate referrals for specific infants or young children and families, for medical, developmental, mental health, and/or other needs.

5D.2.

Works to ensure that referrals meet the diverse needs of families, with particular consideration given to issues concerning resources, culture, and language.

5D.3.

Establishes and maintains positive relationships with other professionals and agencies within the community, tribe, or state, and collaborates (or helps program or other setting staff to collaborate) with all parties involved to facilitate referrals and coordinate services.

6. CLASSROOM AND HOME-FOCUSED CONSULTATION

Collaborates with caregivers and program staff to promote equitable, warm, and trusting relationships, consistent routines, and development-enhancing interactions that positively impact classroom and home climates. Understands and values the roles culture and language play in supporting infants' and young children's social and emotional development, and incorporates family's culture and primary language into classrooms and homes to build continuity in the learning experiences for infants and young children between the classroom and home. Takes time to understand how race/ethnicity, primary language, and abilities influence the family's experiences and the classroom's and system's role in oppressing or supporting wellness. Resists applying a deficit-based perspective to infants, young children, and families who are from historically marginalized and oppressed communities by committing to learning about authentic community strengths and adaptive responses to poverty, historical trauma, and other racialized experiences.

6A. Promotes Secure and Supportive Relationships Between Infants and Young Children and Adults that Respect the Cultures, Languages, and Abilities of Each Family

Core Skills

6A.1.

Helps families and staff deepen their understanding of how the quality of adult-infant/young child relationships impacts the way that infants and young children experience themselves in various settings, learn expectations, and understand how to interact and get along with others.

6A.2.

Helps families and staff understand and use (or, in the case of HV staff, support families in using) the power of positive relationships and adult-infant/young child interactions to support growth and development.

6A.3.

Offers insight into the role of positive sibling, peer, and group interactions in promoting infants' and young children's growth and well-being. Supports families and staff in promoting, fostering, and/or engaging in such interactions. Suggests, as needed, a range of strategies that honor varying cultural perspectives, and promotes successful give-and-take with peers.

6A.4

Supports the development of and addresses impediments to positive relationships between (1) families and program staff, (2) program team members, (3) early childhood professionals, such as ECE teachers, early childhood providers, ECE administrators, HV staff and their peers and supervisors, and child welfare workers and supervisors.

6B. Supports Families and Staff in Understanding the Nature of Development and Possibilities for Developmental Support

Core Skills

6A.1.

Shares information about how infants and young children learn and develop and the role that culture plays in their developmental and learning in a way that families and staff can understand, embrace, and use.

6A.2.

Fosters families' and staff's abilities to promote and facilitate the development of infants' and young children's relational capacities and social and emotional learning, including their capacities for connection, self-regulation,

6C. Supports Families and Staff in Providing or Encouraging Consistent Routines and Developmentally Appropriate and Culturally Responsive Interactions and Practices

Core Skills

6C.1.

Supports families and staff in initiating, modifying, and/or supporting routines to promote safety and consistency in developmentally appropriate and culturally meaningful ways.

6C.2.

Collaborates with families to promote practices and interactions that respect and respond to their cultural values and beliefs and are responsive to the needs of individual infants and young children and groups of infants and young children.

6C.3.

Helps staff understand the impact of societal biases and prejudices on one's own interpretation of infants' and young children's interactions and behaviors (especially with infants and young children from historically marginalized and oppressed communities).

6D. Fosters a Deepened Understanding of Mental Health Issues and Related Interventions Child's Behavior

Core Skills

6D.1.

Assists programs or other settings and providers in selecting, suggesting, and/or implementing observation strategies, tools, assessments, and recording techniques to gain insight into the functioning and social and emotional climate of homes or classrooms, and help identify and eliminate potential disparities by race/ethnicity, primary language, culture, abilities, disposition, and life circumstances.

6D.2.

Helps families and providers integrate ideas, activities, and resources that infuse mental health principles into the daily routines and interactions of a particular home or classroom that respect and respond to families' culture, language, and values.

6D.3.

Helps providers understand mental health, trauma, and healing in the context of historical, racialized trauma.

7. PROGRAMMATIC CONSULTATION

Maintains a systemic approach and aims for program-wide impact through a focus on multiple issues that affect the overall quality and equity of an early childhood setting. Works to enhance programmatic functioning by assisting program administrators and/or staff in considering their program's overall social and emotional climate; solving issues that affect more than one infant or young child, staff member, and/or family; analyzing and using disaggregated data to track program-wide disparities in both opportunity and disciplinary practices; and developing and implementing policies that create more equitable experiences for infants or young children and families.

7A. Understands and Attends to Program Cultural Context, Design, and Infrastructure

Core Skills

7A.1.

Initiates consultation services with an agreement outlining roles, scope of work, frequency, duration, and related issues.

7A.2.

Establishes a relationship with program leadership in a manner that builds the program's capacity to embed equitable and inclusive practices that champion social and emotional wellness in program functioning; promote the relational health of infants, young children, families, and staff; and foster infants' and young children's healthy social and emotional development.

7A.3.

Learns about a program's organizational structure, including staff roles and responsibilities and lines of authority. Shares information about the role of the consultant, including its parameters and limitations. Uses established pathways to engage all members of the organization to ensure that all voices are heard and considered, particularly those that have been marginalized.

7A.4.

Becomes familiar with and works within a program's mission and policies, especially those impacting staff development, family engagement, and positive behavioral supports, and provides recommendations to build the program's capacity to strengthen and embed equitable and inclusive practices to reduce potential disparities in disciplinary practices, access, and opportunity and improve infant and young child outcomes.

7A.5.

Develop an authentic understanding of the communities within which a program is located. This encompasses discovering and documenting the life of the community, including its history, power structures, and service structures.

7A.6.

Pays particular attention to program policies that may disproportionately disadvantage certain groups of infants and young children due to race/ethnicity, primary language, culture, abilities, disposition, and life circumstances.

7A.7.

Facilitates the discovery of gaps between policies and program practices that impact the provision of a healthy social and emotional climate and that are related to infant and young child outcomes.

7A.8.

Identifies factors (including policies, practices, leadership style, and professional development) that influence a program's social and emotional climate.

7A.9.

Evaluates the efficacy of program-level intervention strategies, and revises them as needed to ensure that they respect and respond to family culture, values, and language.

7A.10.

Elicits and explores multiple perspectives in understanding concerns within a program, encourages the development of clear lines of communication between program staff, and represents the perspectives of consultees to others across all levels of the institutional hierarchy. Fosters solutions that build collaborative relationships, include the cultural perspectives of program staff and families, and support common goals.

7A.11.

Facilitates effective interventions to address relational difficulties that negatively impact a program's mental health climate. Understands interpersonal dynamics associated with race/ethnicity, primary language, culture, abilities, disposition, and life circumstances and how these issues, if left unaddressed, can manifest in conflicts, tensions, and misunderstandings. Understands the context of the community in which a center functions, including factors related to its history, culture, language, values, strengths, and resilience.

7B. Supports and Facilitates Program-Wide Approaches to Supporting the Mental Health of Infants and Young Children and Families

Core Skills

7B.1.

Coordinates with and among external quality-enhancement efforts and internal program resources (e.g., instructional coaches, T/TA efforts, program leadership).

7B.2.

Shares information about resources and best practices to support programmatic decision-making and effective implementation of program-wide approaches to healthy social and emotional development.

7B.3.

Provides guidance related to resource selection and adaptation in a manner consistent with a specific program's philosophy, needs, and culture.

7C. Engages in Group Facilitation

Core Skills

7C.1.

Facilitates group processes that support staff in working toward and maintaining a focus on established goals. Attends to and manages complex group dynamics.

7C.2.

Promotes being sensitive to the feelings of others, communication, and/or activities that facilitate mutually respectful relationships, interactions, and teamwork.

7C.3.

Offers direction during times of ambiguity, maintaining a focus on both promoting infants' and young children's healthy social and emotional development and cultural well-being and supporting caregivers' mental health needs.

7D. Supports and Facilitates Plans for Mental Health Support During Crises or Disasters

Core Skills

7D.1.

Facilitates or links programs or other settings to appropriate resources when developing and implementing plans to prepare for or respond to disasters or crises.

7D.2.

Provides guidance related to the manner in which crisis drills are implemented. Considers developmentally appropriate explanations, procedures, advance preparation, and debriefing for staff, families, and infants and young children. Anticipates potential negative impacts of crises on individual and or groups of children and families, and proactively establishes plans to address needs and concerns before, during, and after the crisis.

7D.3.

Recognizes the nature and parameters of the consultant's role during crises and is familiar with available crisis services. Considers the importance of the timing of the consultant's entry or reentry into a program or other setting recently impacted by crisis.

8. SYSTEMS-WIDE ORIENTATION

Works within and across systems, integrating mental health concepts and supports into environments where infants and young children spend time in ways that respect their cultures. Maintains awareness of inequities within the systems in which IECMHC occurs, and considers these contexts when seeking to understand factors that promote or hinder the process of change. For a more in-depth discussion of systems, please see the Systems section of the website.

8A. Evaluates the Complexity of Working Within Multiple Systems

Core Skills

8A.1.

Demonstrates the ability to articulate basic concepts of systems theory, and understands how they inform the process of IECMHC.

8A.2.

Demonstrates the ability to work concurrently within two or more systems, and understands that changes in response to IECMHC may influence multiple systems.

8A.3.

Works within and across systems, integrating mental health concepts and supports into the environments where infants and young children spend time in ways that respect their cultures.

8A.4.

Considers the historical and cultural contexts of communities and their members, and recognizes cultural influences on values, perspectives, and actions.

8A.5.

Demonstrates awareness of and sensitivity toward attitudes and strengths of community members (e.g., community leaders, agencies, service providers).

8A.6.

Understands systemic racism, how it manifests within and across systems, and how it affects infants, young children, and families. Understands how infants', young children's, and families' intersecting identities and interactions across systems can compound disadvantage.

8B. Bridges Services to Promote Cohesion for Infants, Young Children, and Families

Core Skills

8B.1.

Gains entry into and engages effectively with programs and other settings serving infants, young children, and families where consultation services are delivered.

8B.2.

Maintains up-to-date information about community resources. Limits unnecessary barriers that prevent families from accessing services by making effective referrals.

8B.3.

Establishes relationships with professionals in other early childhood and mental health disciplines, including those providing counseling and treatment services.

8B.4.

Encourages networking between ECE/HV settings and programs and other settings within a community serving infants, young children, and families.

8B.5.

Uses and shares current information about standards (i.e., professional, program, and licensing standards), resources, and systems serving infants, young children, and families.

8C. Promotes Mental Health and Social and Emotional Well-Being

Core Skills

8C.1.

Promotes healthy social and emotional development through the creation and/or distribution of culturally and linguistically responsive informational materials and resources that can be disseminated to a range of audiences.

8C.2.

Maintains visibility as a resource for promoting healthy social and emotional development and mental wellness.

8D. Understands Inequities Across Systems and How to Dismantle Them Through Policy

Core Skills

8D.1.

Understands historical and current inequitable distribution of opportunities and resources across systems and how such inequities affect families.

8D.2.

Understands the role of history and policy in systemic and institutionalized racism and how to advocate for systemic change to create more equitable systems serving infants, young children, and families. .

TRIBAL CONSIDERATIONS

Although some tribes have IECMH consultants who are from the community and are tribal members themselves, due to both the newness of the IECMHC field and the general lack of IECMH consultants nationally, tribal programs may obtain the services of a consultant who is new to tribal work. In the latter case, programs can take some or all of the following steps to integrate a consultant into ongoing efforts to support infants, young children, and their caregivers:

Provide a cultural guide or mentor—someone the IECMH consultant can go to with questions, to learn about the community, and to engage in ongoing reflection. A simple explanation of why things happen in a certain way may clear up potential misunderstandings, and consultants will appreciate the opportunity for guidance so they may avoid inadvertent errors. Consultants may also find their own previously held assumptions or perceptions shifting, and an opportunity to discuss, question, and ponder those assumptions and perceptions will support their personal development.



Provide a tour of the community, including housing areas and the places often frequented by infants, young children, and their families (e.g., youth center, family resource center).



Provide the consultant with the history of the tribe or tribal community, and share any historical information that may be relevant to the work the consultant will do. Knowledge of the historical context can aid consultants in understanding present-day dynamics. For example, information about the Indian Relocation Act and its consequences is helpful for a consultant working in an urban Indian Center.



Provide the consultant with culturally based resources appropriate for them to use. For example, if consultants are aware that a traditional dance troupe includes young children, they may recommend participation for a child who will benefit from this activity.



Increase the consultant's awareness of potential referral sources by providing a list of tribal service providers and tribal agencies serving infants, young children, and families, including wrap-around services and county-based services used by tribal families.



If the consultant will provide program-level or organizational-level consultation, describe the governing structure of the tribe or Indian Center (e.g., tribal council, governing board, organizational divisions), and clarify how the program or organization fits within this overall framework.