



Curriculum Guidelines for Infant and Early Childhood Mental Health Consultation



Curriculum Guidelines for Infant and Early Childhood Mental Health Consultation is grounded in the national IECMHC competencies. These competencies and this document are the first step towards building a national consensus on the foundational skills, knowledge, and abilities needed to be a competent IECMH consultant.

Disclaimer

The views, opinions, and content of this publication are those of the author and do not necessarily reflect the views, opinions, or policies of SAMHSA or HHS.

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Infant and Early Childhood Mental Health Consultation fosters nurturing environments where healthy relationships grow so children can succeed.

This guide is designed to assist in developing curriculum to prepare Infant and Early Childhood Mental Health (IECMH) consultants for the unique challenges and opportunities of their discipline. The document provides a roadmap to the knowledge, skills, and capacities that professionals who intend to become IECMH consultants should possess. These guidelines are not exhaustive. This document outlines the basic competencies that should be required of IECMH consultants before they pursue more advanced training in the field.

IECMHC is a prevention-based mental health service that can apply to a wide array of infant and early childhood service providers and settings. IECMHC has the capacity to effect widespread change by engaging early childhood stakeholders and families to ensure they have the knowledge and skills they need to best nurture young children and support their optimal growth and development. IECMHC is distinct from other mental health services, such as treatment, in how it synthesizes and applies three disciplines: Consultation, Systems Theory, and Infant and Early Childhood Mental Health.

This guide is recommended for use in the development of initial and ongoing training standards and foundational content for IECMHC curriculum, that would be used in training Infant and Early Childhood Mental Health Consultants.

TRAINING DOMAINS

These guidelines feature five IECMHC training domains:

- Training Domain 1: Overview of IECMHC
- Training Domain 2: The Role of the IECMH Consultant
- Training Domain 3: Types of IECMHC Services
- Training Domain 4: A Systems Framework—Understanding the Processes of IECMH Consultation
- Training Domain 5: Diversity and Equity Considerations for IECMHC Practice

Each domain consists of seven sections:

1. Introduction
2. Key Content Areas
3. Key Facts
4. Relevant Competencies
5. Outline of Key Content Areas
6. Advanced Training Recommendations
7. Tools and Resources

IECMHC COMPETENCIES

The fourth section of each training domain features specific, applicable competencies that were developed by the Center of Excellence for Infant and Early Childhood Mental Health Consultation (Center of Excellence or CoE). These competencies “represent the most up-to-date compendium of attributes, knowledge, and skills needed to become a competent IECMH consultant” (SAMHSA, 2017), and they serve as the primary drivers of this curricular guidance. Curriculum developers should consider them foundational to any IECMHC-related work.

The IECMHC competencies itemize and explain the “attributes, knowledge, and skills” that an IECMH consultant must have in eight categories:

1. The Role of the IECMH consultant
2. Foundational Knowledge
3. Equity and Cultural Sensitivity
4. Reflective Practice
5. Child and Family-Focused Consultation
6. Classroom- and Home- Focused Consultation
7. Programmatic Consultation
8. System-wide Orientation

CONSULTANT QUALIFICATIONS

The Center of Excellence recommends the following qualifications for IECMH consultants:

Basic qualifications

- A master's degree in mental health or related field
- At least 2 years of post-masters experience in an area related to infant and early childhood mental health and/or early childhood service systems
- Familiarity with or representative of the communities being served

Preferred qualifications

- Clinical licensure as a mental health professional
- At least 2 years of IECMHC experience
- Experience working in one or more early childhood service delivery systems, such as home visitation, early care and education, child care, early intervention, or Head Start/Early Head Start

QUALIFICATIONS OF THE CURRICULUM DEVELOPER

Curriculum developers who are using these guidelines to write initial and ongoing training standards and curriculum content for consultants should be fully qualified IECMHC professionals. These qualifications include:

- Extensive experience in the field of IECMHC
- A working knowledge of the training content to be developed
- Experience preparing the IECMHC workforce

Note: If you are a curriculum developer but do not have the above qualifications, consider collaborating with another qualified professional or, at minimum, engaging a fully qualified developer to review your curriculum and provide feedback and recommendations.

TRAINING PREREQUISITES

These guidelines assume the following of IECMH consultant trainees:

- A foundational knowledge of child development (typical and atypical), infant mental health, and adult mental health

- Experience working in community-based settings
- The ability to work in a culturally competent and sensitive manner

ADDITIONAL CONSULTANT TRAINING AND SUPPORT

While these guidelines are intended to support the development of foundational trainings for IECMH consultants, the trainings alone are not sufficient to fully prepare an IECMH consultant. Augment these trainings with:

- Training in the skills needed to deliver specific models of IECMHC services and programs
- Ongoing professional development
- Reflective supervision specific to the role of the IECMH consultant

Additional avenues for preparing consultants are explored in *Training and Workforce Development Activities That Prepare and Support IECMH Consultants* in the [Workforce Development section](#) of the IECMHC Toolbox.

RESOURCE

Substance Abuse and Mental Health Services Administration (SAMHSA). (2017). *Center of Excellence for Infant and Early Childhood Mental Health Consultation: Competencies*. Retrieved from <https://www.samhsa.gov/iecmhc/toolbox/competencies>

Training Domain 1: Overview of IECMHC

For many mental health professionals, consultation as a unique mental health activity, was not part of their professional preparation. Training Domain 1 grounds the learner in the history, definitions, applications and benefits of IECMHC as a unique profession and provides foundational material for the remainder of the curriculum content.

TRAINING DOMAIN 1: KEY CONTENT AREAS

1. The definition of IECMHC; IECMHC as a unique profession; the emerging evidence base for IECMHC
2. The history of consultation as a distinct profession; IECMHC principles; the stages of IECMH consultation
3. The purposes of and outcomes for IECMHC
4. The scope of IECMHC within a mental health services continuum
5. IECMHC integration within child-serving systems
6. The IECMHC competencies; how they conceptualize and define the work of IECMHC

TRAINING DOMAIN 1: KEY FACTS

- IECMHC is a prevention-based intervention.
- IECMHC is a triadic, indirect service (see the Consultation graphic on page 11). Consultants partner with providers (the consultees), who in turn support young children and their families. The consultants help providers develop their capacity to optimize outcomes for young children and their families.
- Gerald Caplan’s work treating thousands of adolescents traumatized from World War II was seminal in IECMHC’s development, as Caplan confirmed the importance and value of “counseling the counselors” to maximize available mental health services.
- Selma Fraiberg helped to confirm the importance of infant and early childhood mental health and influenced the development of the field.
- IECMHC is a holistic approach designed to improve the environments and systems surrounding infants and young children. IECMHC services promote healthy social and emotional well-being for all young children, and seek to prevent longer-term risk for mental health problems.

- IECMHC operates through a systems perspective, providing a range of services and strategies to create, strengthen, and maintain a supportive environment that enhances the social and emotional development of all infants and young children. IECMHC works within and across all child-serving settings (e.g., early care and education, home visiting, child welfare, child care, primary care clinics and hospitals, and homeless shelters).

TRAINING DOMAIN 1: RELEVANT COMPETENCIES

- Understands IECMHC as a mental health specialization that is distinct from other activities of mental health professionals.
- Demonstrates an ability to strengthen the capacity of family members, home visiting (HV) staff, early childhood educators (ECE), and other child- and family-serving professionals to support the social, emotional, and relational health of children and families in a range of settings.
- Partners with providers to prevent and address mental health problems and concerns.
- Understands (a) relationships and how those relationships are influenced by the personal affiliations and formal organizations that affect the lives of young children; and (b) the importance of a parallel process in developing relationships and skills.

TRAINING DOMAIN 1: OUTLINE OF KEY CONTENT AREAS

1. The definition of IECMHC; IECMHC as a unique profession; the emerging evidence base for IECMHC

- Define IECMH consultation; utilize the Consultation graphic (see page 11) as a framework.
- Explain IECMHC as a unique profession that is distinct from treatment and other related services.
- Describe IECMHC as a form of mental health consultation and its unique role within child-serving systems.
- Review the emerging evidence base for IECMHC.

IECMHC Definition

IECMHC is a multi-level preventive intervention that teams mental health professionals with providers who work with young children and their families in order to build their capacity to improve children's mental health outcomes. As such, the structure of IECMHC is referred to as triadic and indirect (see Consultation graphic on page 11).

INFANT EARLY CHILDHOOD MENTAL HEALTH CONSULTATION

Fostering nurturing environments where healthy relationships grow, so children can succeed.



IECMHC is applicable to a wide array of infant and early childhood service providers and settings. IECMHC is a mental health service based on principals of prevention, consultation and Infant Early Childhood Mental Health. It strengthens providers in their efforts to support the children and families in their care.



Brings mental health supports into natural settings where young children are.



Builds the capacity of child and family providers to create nurturing environments where young children thrive.



Young children succeed in learning and relationships.

"The best way to help young children is to help parents and other adults closest to them." - Dr. Jane Knitzer



2. The history of consultation as a distinct profession; IECMHC principles; the stages of IECMHC

- Provide an overview of the history of mental health consultation as a unique profession separate from therapy and treatment.
- Briefly review Gerald Caplan’s contribution to the structure and types of consultation that lay the foundation for IECMHC today.
- Review the principals of consultation.
- Provide an overview of the common stages of consultation: entering the new environment, establishing mutual expectations for the work, gathering information (to include observation and assessment) and perspectives of all involved (including the child), facilitating the establishment of goals (developing and implementing strategies), supporting and assessing progress (modeling, coaching, providing information, etc.), righting the course of the consultation when necessary, transitioning, and ending.

Gerald Caplan’s Original Consultative Assumptions

- Consultation is a problem-solving and educational process.
- Consultation is triadic (Consultant, Consultee, Client).
- Consultation is voluntary; the consultee asks for help.
- Consultation is collaborative; consultant/consultee are peers.
- Consultation is temporary.
- Consultation is focused on work-related problems (broadly defined).
- Consultation seeks to help both consultee and client.
- The consultant has no power over the consultee’s actions.
- The consultant may or may not have direct contact with the client.
- The consultant works with the entire person of the consultee—primarily in terms of increasing the effectiveness with the target client(s).

3. The purposes of and outcomes for IECMHC

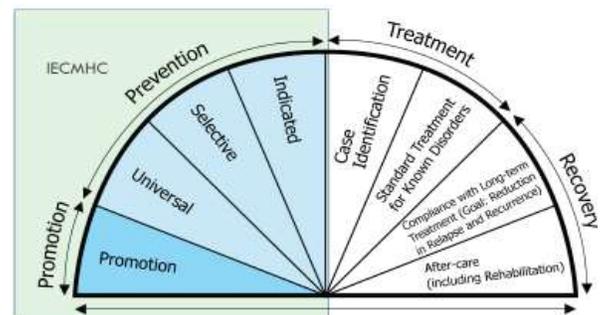
- Address the primary purpose of IECMHC as it is designed to ultimately improve child and family outcomes.
- Assert that consultation encompasses a diverse set of roles that are aimed at supporting the organization or consultee in meeting their objectives or in solving a problem. The focus of IECMH consultation is two-fold: it includes content expertise (IMH, Family Systems, and Consultation) and expert knowledge of the processes involved with how individuals work together within a program or system and how they interface with those they care for.
- Fully examine what IECMHC uniquely offers: a prevention-based approach to ensuring optimal mental health for infants and young children through the relationships that consultants create

with service providers. This approach wed ecological systems thinking and a thorough understanding of early childhood development (especially social-emotional development) with consultative processes.

- Review the following expected outcomes of IECMHC:
 - To improve the systems that surround and support children and their families, consultants support whole systems to function in a more collaborative and interdependent manner.
 - To enhance the knowledge of children’s mental health and support the consultee’s capacity to effectively problem solve, in order to meet the needs of the families and children in their care. The consultant provides mental health and family systems content expertise and promotes objectivity through the use of multiple and diverse perspectives.
 - To create a climate and environment where learning and change can take place. The consultant utilizes a theory of organizational functioning to know where in the organization the intervention needs to take place and the optimal time for the intervention.

4. The scope of IECMHC within a mental health services continuum

- Address how IECMHC promotes infant and early childhood mental health across many settings, including in the home, at child care or school, and in the community (promotion services).
- Address how IECMHC provides prevention services by assuming a role in reducing risk factors and supporting resiliency at the child, family, classroom, program, and community levels (prevention services).
- Address how IECMHC plays a role in connecting those in need of further assessment, evaluation, and treatment services to the relevant community providers (referral-to-treatment services).



IECMHC falls within the promotion and prevention services of the continuum of care. (Adapted from the Institute of Medicine’s Protractor)-SAMHSA

5. IECMHC integration within child-serving systems

- Describe the child-serving systems that IECMHC is designed to benefit (e.g., home visiting, early care and education, pediatric offices, early intervention).
- Describe the ways IECMHC serves as a bridge across these systems.
- Explain how IECMHC is integrated within a service delivery system.

6. The IECMHC competencies; how they conceptualize and define the work of IECMHC

- Introduce the [IECMHC competencies developed by SAMHSA's Center of Excellence](#).
- Describe the ways the competencies provide parameters for what IECMHC is and how it works within different practice environments.

ADVANCED TRAINING RECOMMENDATIONS

- Explore the historical underpinnings of IECMHC. Guide the trainee through an in-depth history of mental health consultation, while orienting him or her to the principles and philosophy of consultation. Include a framework for understanding IECMHC as an evolving field by providing a timeline for the major milestones of Mental Health Consultation, including the relevant theorists, and how theories evolved, contributing to what we know today as IECMHC. Begin with the field's roots in psychotherapy positioned within a medical model, and guide the trainee through mental health consultation's transformation toward the prevention based, community mental health model, articulated by Gerald Caplan. Further highlight efforts distinguishing child mental health consultation from adult mental health consultation, as well as the contributions of Selma Fraiberg in her seminal work of Infant and Early Childhood Mental Health.

TRAINING DOMAIN 1: RESOURCES AND TOOLS

Ash, J., Mackrain, M., & Johnston, K. (2013). Early childhood mental health consultation: Applying central tenets across diverse practice settings. *Zero to Three*, 33(5), 28–33.

Baker, T., Balnton, J., Barklay, A., Golembiewski, R., Kurpius, D., Levinson, H., Perloff, R., Leonard, S. (1992) What is Consultation? That's an Interesting Question! *Consulting Psychology Journal*, Summer 1992. Pp 18-23.

Brinamen, C. F., Taranta, A. N., & Johnston, K. (2012). Expanding early childhood mental health consultation to new venues: Serving infants and young children in domestic violence and homeless shelters. *Infant Mental Health Journal*, 33(3), 283–293.

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- Gilliam, W.S., Maupin, A.N., and Reyes, C.R. (2016) Early childhood mental health consultation: results of a statewide random-controlled evaluation. *Journal of the American Academy of Child & Adolescent Psychiatry*. 55 (9), 754–761. <http://dx.doi.org/10.1016/j.jaac.2016.06.006>
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Training Domain 2: The Role of the IECMH Consultant

Training Domain 2 establishes the unique role of the consultant as distinct from the roles of other mental health clinicians or those in related disciplines. The training details the attributes of effective IECMH consultants and how those attributes are critical to ensuring that the work leads to positive outcomes for infants, young children, and their families. The training also explores the triadic nature of IECMHC as an indirect, specialized mental health intervention, and defines the “Consultative Stance” and its use within IECMHC. In general, the training deepens participants’ understanding of the dynamic relational nature of this approach to consultation.

TRAINING DOMAIN 2: KEY CONTENT AREAS

1. The qualifications and role of the IECMH consultant
2. The triadic, indirect nature of the consultant’s role; how IECMHC is nested within an ecological context
3. The relational nature of consultative work; factors to consider when setting the stage for effective IECMHC services
4. The *consultative stance* as a set of guiding tenets that are foundational to the work; and that are grounded in reflective practice and the principles of infant mental health

TRAINING DOMAIN 2: KEY FACTS

- IECMH consultation is a professional service delivered by a professional who is qualified to practice IECMH consultation.
- The IECMH consultant fulfills a diversity of roles, all of which focus on both the organization they are consulting too, as well as those who work within it.
- The IECMH consultant possesses specialized skills and knowledge at both the content and process levels.
- Healthy relationships are central to the work of the IECMH consultant.
- The consultant is a partner who possesses IECMHC expertise but does not function in the capacity of sole expert in the work.
- IECMHC is indirect and triadic.
- The consultant assumes a consultative stance to advance IECMHC.

TRAINING DOMAIN 2: RELEVANT COMPETENCIES

- Understands the importance of self-awareness and the nature of reflective practice.
- Embraces the consultative stance and reflective practice throughout the consultation process.
- Explores how elements of classroom and/or family life can play a powerful role in supporting all children's social and emotional development.
- Embraces the idea that IECMHC focuses on promoting mental health and social and emotional development using a wide-ranging knowledge base that draws from numerous fields of study.
- Uses reflective practice with consultees to support the consultees' professional growth and development.
- Recognizes and maintains appropriate professional boundaries and roles as defined by discipline (e.g., psychology, social work, and counseling) and scope of practice.

TRAINING DOMAIN 2: OUTLINE OF KEY CONTENT AREAS

1. The qualifications and role of the IECMH consultant

- Review the qualifications of an IECMH consultant, including the definition of IECMHC and the basic and preferred qualifications, as recommended by the Center of Excellence. Align these qualifications with those of the relevant state or tribe, if different.
- Describe the characteristics of an effective IECMH consultant.
- Cover the IECMH consultant competencies in depth:
 - Review of each of the standards of the [IECMHC competencies](#).
 - Compare the similarities and differences of these competencies to those of other mental health professionals.
 - Compare the similarities and differences of these competencies to those of other professionals who work within early childhood systems.
- Examine the role (skills and activities) of the IECMH consultant in:
 - Communicating information about the social-emotional development of children
 - Explaining clearly the importance of IECMH
 - Providing promotion and prevention services
 - Building capacity

- Partnering with the consultee
- Observing, reflecting, and supporting changes in practices
- Promoting healthy work environments, through an understanding of how individuals work together within the program
- Tailoring the work to the environments within which the consultant provides services
- Managing and coordinating activities that help achieve the goals of the consultation service but are not consultation per se (e.g., training, team building)
- Giving referrals external to the consultation setting

2. The triadic, indirect nature of the consultant’s role; how IECMHC is nested within an ecological context

- Fully explore the Center of Excellence IECMH Consultation graphic (see page 11) that depicts the triadic, indirect nature of consultation.
- Review ecological systems theory and how multiple environmental systems and factors influence the child, family, and provider.
- Illustrate IECMHC as an integrated service within larger systems of service delivery.
- Explain the consultant’s role with relation to providers across practice settings and how these relationships serve to connect children/families to those needed services.

3. The relational nature of consultative work; factors to consider when setting the stage for effective IECMHC services

- Describe the essential attributes of an effective mental health consultant (see especially “Essential Attributes,” in the *Competencies and Characteristics of a Highly Qualified Mental Health Consultant*, an IECMHC training module from the Center for Early Childhood Mental Health Consultation, at https://www.ecmhc.org/tutorials/consultants/mod2_3.html).
- Explain collaborative relationships as the cornerstone of IECMHC and the primary vehicles of change.
- Identify the importance of fostering and developing healthy communications and strong relationships among and between professionals, family members, and others involved in the consultative process, utilizing a strengths-based approach.
- Explore the fluidity of relationships among the consultant and those within the consultee’s setting as those relationships change and develop over time.

- Discuss strategies for operating as both participant and observer in relationships.
- Address the structure of effective consultation services (e.g., regularity, role definition, boundaries, goals, expectations, regulations, etc.).
- Explain the differing structures for service delivery among programs and models of IECMHC and provide strategies and approaches for working within those structures.
- Cover the IECMHC principles and practices (especially relationship-based practices) that the consultant will use and apply within any program, set of activities, or sequenced strategies.

4. **The *consultative stance* as a set of guiding tenets that are foundational to the work and that are grounded in reflective practice and the principles of infant mental health**

- Define the consultative stance and its use within IECMHC.
- Analyze the consultant’s “use of self” in the consultative relationship.
- Explain and illustrate the importance of reflective supervision/consultation as a form of professional development for the IECMH consultant, and the importance of self-reflection in this context.
- Explain the role of the IECMH consultant as an equal, collaborative partner within the consultant-consultee relationship.
- Cover what consultants need to know related to the boundaries of their consultation practices, such as the limits of confidentiality; how to communicate with consultees about their role; setting expectations for the consultee with regard to communication, etc.

ADVANCED TRAINING RECOMMENDATIONS

- Explore prenatal, infant, and early childhood development from a Transactional perspective and its implications for IECMHC. Provide a framework for understanding the transactional nature of early development. Highlight how children’s behavior and development must be understood within the context of their primary relationships and the environments in which they live and function. Include content that explores typical and atypical child development as well as overall principles of infant mental health, with particular attention to relationally-based frameworks that emphasize both the child and his or her primary caregiver(s).
- Explore individual and programmatic observation and assessment within IECMHC. Provide trainees with an overview of observation and assessment within the context of consultation. Highlight the importance of the consultant’s capacity to maintain objectivity in his or her work, especially in the processes of and informants involved in gathering data and formulating

hypotheses. Emphasize in the training content, that while this capacity is key to all consultation, the tools selected and manner of observation used in any particular case must be tailored to individual settings and should be based on the type(s) of consultation delivered. Other elements of this training's content should support consultants in:

- Consideration for the internal and external influences that frame information collected through the processes of observation and assessment.
- Understanding of the importance of the consultant's role in actively engaging the consultee/families in the processes of observation and assessment.
- Review of the practical matters connected to tool selection, and the importance of maintaining tool integrity and confidentiality.
- How to operationalize observation, assessment, and feedback within the consultative process.

TRAINING DOMAIN 2: RESOURCES AND TOOLS

Center for Early Childhood Mental Health Consultation. (n.d.). Early Childhood Mental Health Consultation Best Practice Series: Tutorial 2, Module 2—What is the Mental Health Consultant's Role? Georgetown University. Retrieved from <https://www.ecmhc.org/tutorials/defining/index.html>

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Johnston, K., & Brinamen, C. (2006). *Mental health consultation in child care: Transforming relationships with directors, staff, and families*. Washington, DC: Zero to Three.

Schein, E. H. (2013). *Building positive relationships and better organizations: Humble inquiry—The gentle art of asking instead of telling*. Oakland, CA: Berrett-Koehler.

Schein, E. H. (2010). *Organizational culture and leadership* (4th ed.). San Francisco: Jossey-Bass.

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Substance Abuse and Mental Health Services Administration (SAMHSA). (n.d.). *Qualifications of an Infant and Early Childhood Mental Health Consultant*. Retrieved from <https://www.samhsa.gov/iecmhc/toolbox/workforce-development>

Substance Abuse and Mental Health Services Administration (SAMHSA). (n.d.). *Training and Workforce Development Activities that Prepare and Support Infant and Early Childhood Mental Health Consultants*. Retrieved from <https://www.samhsa.gov/iecmhc/toolbox/workforce-development>

Substance Abuse and Mental Health Services Administration (SAMHSA). (n.d.). *Types of Supervision and Oversight Required to Effectively Support Infant and Early Childhood Mental Health Consultants in the Field*. Retrieved from <https://www.samhsa.gov/iecmhc/toolbox/workforce-development>

Substance Abuse and Mental Health Services Administration (SAMSHA). (n.d.). *Interactive Guide to Workforce Development*. Retrieved from <https://www.samhsa.gov/iecmhc/toolbox/workforce-development>

ONLINE LEARNING TUTORIAL

Center for Early Childhood Mental Health Consultation. (n.d.). *The effective mental health consultant: Competencies and characteristics of a highly qualified mental health consultant—Essential attributes*. Georgetown University Center for Child and Human Development. Retrieved from https://www.ecmhc.org/tutorials/consultants/mod2_3.html

Training Domain 3: Types of IECMHC Services

Training Domain 3 describes the types of services that IECMH consultants provide, delineating the various contexts and settings in which these services are delivered. The training also explores how the relationships that the consultant establishes within those contexts and settings are central to effective practice. Finally, the training highlights strategies for determining the level and type of service appropriate for specific referrals for IECMHC in different settings.

TRAINING DOMAIN 3: KEY CONTENT AREAS

1. The key types of IECMHC services and the various settings where they apply
2. The skills needed to adapt and engage effectively within the environments of various child-serving settings; factors that impact relationships and behaviors within those settings
3. IECMHC as a service engaged in promoting social, emotional, and relational wellness in a way that aligns with the goals of the settings where the services are delivered

TRAINING DOMAIN 3: KEY FACTS

- IECMH consultants work simultaneously within multiple programs, services, and settings.
- IECMHC integrates consultation efforts with the programs, services, and settings being served.

TRAINING DOMAIN 3: RELEVANT COMPETENCIES

- Supports and facilitates referrals, service provision, and community collaboration.
- Collaborates with families and ECE staff (or, in the case of HV staff, helps staff to work with families) to promote practices and interactions that are responsive to the needs of individual children and groups of children.
- Demonstrates an ability to strengthen the capacity of providers to support the social, emotional, and relational health of children and families in a range of settings.
- Supports and facilitates program-wide strategies for improving mental health of children and families.
- Establishes and maintains positive relationships with other professionals and agencies within the community, tribe, or state; and collaborates (or helps ECE/HV staff to collaborate) with all parties involved to facilitate referrals and coordinate services.

- Supports the development of and addresses impediments to positive relationships among (1) families and ECE/HV staff, (2) ECE team members, (3) ECE teachers or providers and ECE administrators, and/or (4) HV staff and their peers and supervisors.

TRAINING DOMAIN 3: OUTLINE OF KEY CONTENT AREAS

1. The key types of IECMHC services and the various settings where they apply

- Define the general types of IECMHC: child-family, classroom, program, and community.
- Identify the consultee for each type of IECMH consultation, as well as the individual(s) for whom the consultation was obtained (e.g., child, children, parent-child, family) and the expected IECMHC outcomes for each. Use the IECMH Consultation graphic (see page 11) to discuss and describe.
- Describe the various settings in which IECMHC can take place (child care settings, home visiting programs, pediatric offices, etc.).

2. The skills needed to adapt and engage effectively within the environments of various child-serving settings; factors that impact relationships and behaviors within those settings

- Explain the importance of connecting to all child-serving settings, agencies, and communities, and the skills needed:
 - To gather information and engage multiple people at various levels and times during the consultation
 - To understand where, from whom, and why a referral for IECMHC may originate
 - To consider the IECMH consultant's role in the program or agency where the consultation will take place
 - To anticipate and plan for the various levels of the system (child, classroom, provider, program, community) that the consultation will likely impact
- Feature strategies for eliciting and responding to referrals for IECMHC:
 - to widely promote IECMHC services and how these are accessed
 - to communicate the benefits of IECMHC services to the intended service recipients
 - to engage children and families, i.e. through the endorsement of trusted service providers, and provision of helpful resources.

- to collaborate with partner agencies, i.e. maintaining visibility in local community collaborative groups and participating in early childhood initiatives, where opportunities to share about and partner on common goals exist.

3. IECMHC as a service engaged in promoting social, emotional, and relational wellness in a way that aligns with the goals of the settings where the services are delivered

- Summarize and examine the social-emotional goals and related policies of the agencies with which consultants will be engaged.
- Feature strategies for aligning the consultation to the relevant goals of these settings/agencies.
- Explore the necessary working knowledge of other early childhood disciplines with which consultants are likely to interface in their consulting work.
- Provide information about the different service providers and their roles, including the capacities and limitations of these roles; explain how these providers interface with one another.
- Examine any existing programs, providers, guidance, resources, curriculum, and so forth that are being used to support social-emotional and relational development and align the consultation work with these to ensure a seamless delivery.
- Illustrate how to work collaboratively with cross-sector partners to create plans that will guide the consultation work by:
 - Identifying roles, resources, and timelines
 - Coordinating with existing resources so the work can be streamlined
 - Identifying areas of capacity
 - Addressing any challenges or barriers to the process

ADVANCED TRAINING RECOMMENDATIONS

- Explore the practical aspects of delivering IECMHC. Introduce IECMH consultation as a specialization within the mental health field with its own body of concepts and techniques. Highlight the unique knowledge, skills, and experiences required of a consultant to fulfill the diversity of roles inherent in the consultation work, as well as those skills needed for consultation to be effective in a range of settings. Include training content that differentiates the methods of delivery and strategies associated with IECMH consultation from delivery systems and strategies employed by other service types (e.g. psychotherapy, educational coaching, behavior modification programs, professional development initiatives, etc.). Explore

the nature of IECMHC through a mental health lens and as an indirect consultation service. Provide an in depth review of two foci of the consultation, 1.) The mental health expertise or technical content of the consultation and 2.) The organizational processes involved with how individuals work together in the agency setting, and explore these as an integrated approach within the consultation work.

TRAINING DOMAIN 3: RESOURCES AND TOOLS

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Training Domain 4: A Systems Framework— Understanding the Processes of IECMH Consultation

Training Domain 4 offers a systems framework to guide the work of the IECMH consultant. This training outlines the most complex aspect of IECMHC—the nuanced interactions of applied theories within the dynamic nature of the consultation work itself. Theories of systems, change, and learning are briefly introduced. The value of each are explored in terms of their applications to the consultation setting and their relevance to the IECMHC processes. The primacy of relationships overall is highlighted.

TRAINING DOMAIN 4: KEY CONTENT AREAS

1. A systems perspective as the primary lens within which the IECMH consultant works
2. The uniqueness of each consultation setting; the formal structures established to guide the work in the service setting, as well as the informal structures, cultural assumptions, and processes that influence the consultees and clients i.e., the system.
3. How learning takes place, how change occurs, and how developing an understanding of these processes can be used effectively to guide the consultant’s work
4. The consultation relationship as a central agent of change within the broader systems context

TRAINING DOMAIN 4: KEY FACTS

- IECMHC integrates multiple theories that guide an understanding of systems and human relationships.
- The consultant-consultee relationship is nested within an intersecting ecological framework.
- The diverse and evolving consultative process reflects the dynamic nature of people and systems.
- Consultation is a change agent based on relationships; psychological safety is a requirement for the consultant and the consultee so that both can engage their curiosity, reflect, and take risks—all of which occurs within the consultative relationship and is necessary for effective change to occur.

TRAINING DOMAIN 4: RELEVANT COMPETENCIES

- Understands and can apply the multidisciplinary body of knowledge that informs consultation.

- Works within and across systems, integrating mental health concepts and supports into the environments where young children spend time.
- Maintains awareness of the systems within which IECMHC occurs, and considers these contexts when seeking to understand factors that promote or hinder the process of change.
- Understands the role of the consultant within the context of multiple systems, and considers how interventions in one system may impact others.
- Describes and demonstrates how culture (beliefs, values, attitudes, biases, and experiences), equity, and environment shape relationships and behaviors, and how they influence settings and communities in important and meaningful ways.
- Understands that the quality of relationships among adults (between staff members and/or between staff members and families) influences children’s experiences in their classrooms, care settings and homes.

TRAINING DOMAIN 4: OUTLINE OF KEY CONTENT AREAS

1. A systems perspective as the primary lens within which the IECMH consultant works

- Define Systems Theory and its key concepts. Explore its applications to IECMHC. IECMH consultants work within and across multiple systems (e.g., consultants’ own employing agency; the consultation service settings; the communities in which they work; and the environments where providers, children, and families spend time). Review how these systems interface with and potentially impact one another.
- Illustrate the span of systems across which IECMHC is designed to work, and identify the variability and diversity of the IECMHC work within each respective system.
- Explore the ways a consultant may experience contextual influences upon the *client system* (e.g., the client is the child, a group of children, parent and child) with consultees, using Ecological Systems Theory (Bronfenbrenner, 1992), and how consultants and consultees can co-create strategies that support the consultation’s ultimate goal of enhancing provider/caregiver-child relationships.
- Explain and examine the dynamic, evolving nature of IECMHC, as people and systems are constantly in flux, and how this constant change influences the work of the consultant.

2. The uniqueness of each consultation setting; the formal structures established to guide the work in the service setting, as well as the informal structures, cultural assumptions, and processes that influence the consultees and clients i.e., the system.

- Describe the common agency structures and organizational influences within service settings—such as mission, goals, policy and procedures, organizational charts, staff roles, external resources, and so forth—that are important for consultants to consider in their work.
- Explore the impact on the consultee/client of the degree and manner in which these structures are implemented.
- Review culture broadly and as an embedded influence within each service setting. Explore the ways consultants learn about different cultures and how culture influences the dynamics of the relationships among individuals and groups, and within systems. Explore also the value of understanding cultural influences through the lived experience of consultee(s), including historic and present-day influences.
- Describe how individuals and groups interface. Examine the importance of understanding when and how interactions and relationships can be used to promote the work of the consultant and where these interactions and relationships may serve as obstacles.

3. How learning takes place, how change occurs, and how developing an understanding of these processes can be used effectively to guide the consultant’s work

- Describe IECMH consultation as a targeted effort to address some aspect of the consultee’s professional functioning, where a change in practice behavior is needed in order to effectively impact the client (child, children, or parent-child in their care). Primary areas of focus include increasing one or more of the following: knowledge, skill, confidence, or objectivity (Caplan, 1970).
- Review Adult Learning Theory (Knowles, 1980) and apply this theory to practice to improve critical skills, increase essential knowledge, and sharpen discernment for where and how to focus the work. Provide content and list experiences for mastering:
 - Setting the cooperative climate and understanding unique interests and needs
 - Creating objectives based on interests and needs, as well as on skill level, considering the sequencing and timing of activities toward the objectives
 - Working collaboratively to select methods, materials, and resources for the instruction
 - Evaluating with the consultee the effectiveness of the consultation and making course corrections together
- Provide a broad overview of relevant theories of change, such as Lewin’s (unfreezing, changing, re-freezing; 1947) and Prochaska’s (2002) to conceptualize the nature of change. Explore the

level of anxiety that accompanies change and the supports needed to work with and through the anxiety in order to facilitate the process and effect change.

- Establish change as an opportunity to support learning; and explore the consultant’s role in creating, through the relationship with the consultee, a place of safety—both psychologically and professionally.

4. The consultation relationship as a central change agent within the broader systems context

- Describe how change is inherent in the act of a consultant entering the consultation setting. Also examine parallel processes within the systems context, as everything the consultant does is an intervention and impacts to some degree all areas of the system. Explain and explore how each intervention employed through the consultation needs to be seen as helpful.
- Explain how consultants establish partnerships with all agency staff, build relationships, and work concurrently with the agency administration and staff to improve their effectiveness with their client.
- Examine how a consultant enters the consultation partnership by genuinely accepting his or her own ignorance (Schien, 2010) about the system and situation, and uses this to pave the way for true co-discovery and co-creation of change strategies with consultees.
- Describe and explore how the consultant engages in a flexible and varied “use of self” based on the unique needs of a setting, its context, and the relationships involved (i.e., in a range of situations, the consultant is able to serve as an observer, listener, facilitator, problem-solver, and/or educator).

ADVANCED TRAINING RECOMMENDATIONS

- Explore Systems Theory and its key concepts (i.e., system, boundaries, homeostasis, adaptation, reciprocal transactions, and feedback loops). Consider these concepts in the processes of consultation and change. Use them also to understand resistance to change within the context of the broader system where the consultation takes place and to uncover and implement effective change strategies.
- Review theories of Group Work (Yalom & Leszcz, 2005) and Group Dynamics (Lewin, 1947) as a way of understanding predictable processes by which groups develop and the social roles and behaviors people assume when they work in groups. Explore the effects of group dynamics on other group members and on the group as a whole; explore also how these effects may help or impede the work and the goals of the consultation.

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Training Domain 5: Diversity and Equity Considerations for IECMHC Practice

Training Domain 5 explores the nexus of equity and consultation, highlighting the centrality of cultural responsiveness to the IECMHC process itself. This training specifically examines the power of culture to influence and inform the consultative process as well as the systems in which IECMH consultants operate. The training highlights what consultants need to know and be able to do in order to incorporate issues of culture and diversity into their practice in ways that enhance and strengthen their efforts.

TRAINING DOMAIN 5: KEY CONTENT AREAS

1. Diversity, equity, and awareness as integral to the consultation processes.
2. The skills to recognize and respond to the diverse values, beliefs, practices, and expectations of consultee(s), building on strengths and areas of alignment
3. How culture, values, beliefs, diversity, equity, and implicit bias impact our understanding of systems dynamics

TRAINING DOMAIN 5: KEY FACTS

- Diversity and equity considerations are foundational to the consultation process.
- IECMHC can and should be a vehicle for attaining greater equity in access and outcomes for all young children (SAMHSA, 2017).
- IECMH consultants understand the importance and influences of diversity and equity within their work and relationships.
- Understanding the unique culture of a particular setting is essential to aligning the consultation to the mission and goals of that setting.
- Culture can be a source of psychological grounding, offering a sense of belonging.

TRAINING DOMAIN 5: RELEVANT COMPETENCIES

- Describes and demonstrates how culture (beliefs, values, attitudes, biases, and experiences), equity, and environment shape relationships and behaviors, and how they influence settings and communities in important and meaningful ways.
- Appreciates culture as a source of resilience.

- Demonstrates an appreciation of the unique values and beliefs of each family and each family’s structure, and can work effectively with children and families from a range of cultural backgrounds.
- Demonstrates the skills to identify and address implicit bias in practice; identifies and can effectively discuss program, local, state, or other system policies that disproportionately disadvantage one group of children or families (including expulsion and suspension policies and language access); can support others to recognize and address inequities.
- Considers the historical and cultural contexts of communities and their members, and recognizes cultural influences on values, perspectives, and actions.

TRAINING DOMAIN 5: OUTLINE OF KEY CONTENT

1. Diversity, equity, and awareness as integral to the consultation processes

- Establish the importance for the consultant of the capacity to work within an array of settings/organizations that differ in cultural perspective and priorities.
- Identify the influence of culture on perceptions, beliefs, and relationships at all levels of the child-serving system.
- Address diversity-informed tenets (Irving Harris Foundation, 2018) as a basis for exploring issues of equity and implicit bias and the ways that these issues may impact their role.
- Explain how the consultation process brings people together from diverse perspectives, backgrounds, agendas, and so forth, and how the process facilitates opportunities to uncover, understand, and attend to bias so that healthy relationships can develop; know the importance of ensuring that all voices are heard or represented.
- Describe the importance of using data to understand equity in access for children and their families; recognize the use of data as a means to identify potential barriers to services, to design strategies to correct inequities, and to confirm outcomes.

2. The skills to recognize and respond to the diverse values, beliefs, practices, and expectations of consultee(s), building on strengths and areas of alignment

- Explore how culture influences, shapes, and defines settings; and consider how culture impacts relationships and behaviors within those settings.
- Examine strategies for understanding a setting’s culture(s), including the cultures of individuals within the setting, the culture of the agency, and the community’s cultural norms; explain the importance of determining the role culture plays in relation to the community, program, staff, child/family, and consultant.

- Explore the consultative stance as it is informed by cultural considerations.
- Examine the personal influences of culture, beliefs, ethnicity, and race, and how these elements interface with and influence the work of a consultant.
- Feature strategies for consultants to increase their own understanding of the history of a community—including historic trauma and historic resilience—and of the available community-based wellness approaches.

3. How culture, values, beliefs, diversity, equity, and implicit bias impact our understanding of systems

- Explore the impact of implicit bias on the system or on individuals who support young children; explain the dynamics and root causes of implicit bias, and identify opportunities to open conversations and address it.
- Explain the challenges and benefits of working within diverse systems by:
 - Identifying and integrating the strengths and benefits of culture and diversity into systems
 - Bringing the language of the community that is specific to mental health and wellness into the consultation work; and using that language to inform a shared vision
 - Exploring how culture influences, shapes, and defines settings; and considering how culture impacts relationships and behaviors within those settings

TRAINING DOMAIN 5: RESOURCES AND TOOLS

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VIDEO RESOURCES

- The 6-minute video *Recognizing Bias and Promoting Equity in Early Childhood Settings* features interviews with experienced IECMHC practitioners. These experts discuss the importance of addressing implicit bias and providing a culturally responsive environment in early childhood settings. Available at <https://www.samhsa.gov/iecmhc/about/equity>
- The 2-minute video *Supporting Cultural Traditions Within the Child Care System* shares a case study that highlights a success story of culturally informed work in a tribal early childhood setting. Available at <https://www.samhsa.gov/iecmhc/about/equity>

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