

1.The Role of the IECMH Consultant

Welcome to module 1, The Role of the Infant and Early Childhood Mental Health Consultant, in the Center of Excellence for Infant and Early Childhood Mental Health Consultation's introductory series on Infant and Early Childhood Mental Health consultation competencies. This module provides an overview of the eight competencies and core skills associated with the Role of the IECMH consultant.

Each of the eight competencies consists of several core skills. As I mentioned earlier, we will review a few of these in more depth later. To see the full list of competencies and skills, please see the resources at the end of the module.

The first competency is: Distinguishes IECMHC from other related endeavors. It is important for consultants to be able to grasp and convey to others the ways in which consultation is distinct from other activities in which mental health professionals may engage, like direct mental health treatment and care. The role of the consultant is also different from other early childhood and family providers' roles. The unique training and preparation that consultants undergo support and inform this difference.

Let's consider this competency in more depth. When we think about adults in infants' and young children's lives, who are we thinking about? (PAUSE FOR 3 seconds). We think about families, including extended families and created families. We think about staff that care for infants and young children in child care or home visiting programs. Perhaps we think about doctors or other medical practitioners and about adults in administrative roles who work in programs serving infants, young children, and families.

It's these adults to whom the relationship-based work of consultation is often directed. For them, the purpose of the consultative experience is to increase their awareness of and knowledge about healthy social and emotional development; to promote their ability to create culturally responsive, healthy, reciprocal relationships with the infants, young children, and families in their care (as well as with their co-workers); and to improve their own self-regulation and other aspects of their social and emotional health and well-being. Consultants' abilities to strengthen these adults' reflective capacity as it relates to the healthy social emotional development of the infants and young children in their care helps prevent mental health problems from developing or worsening and supports adults' ability to respond effectively to infants' and young children's existing mental health concerns.

One of the differences between consultation and other types mental health treatment and care is that consultation is provided in natural settings. Sometimes that means that the work takes place in an early care and education environment; sometimes in a family's home; and sometimes in another location like a pediatrician's office, a homeless shelter, or even a park. All these settings require the consultant to be comfortable working in unstructured, busy, and sometimes informal environments that nonetheless reveal much about the context in which development and relationships occur.

Take a moment to think about these questions. (PAUSE 3 seconds) How would YOU begin to learn about the norms, organizational functioning, and program impacts that are so important to understanding the needs of the people in this picture of a young child with her teacher at a child care center? Please take 2 minutes to jot down some of your questions that you would want to consider .

Some questions may include: How many children are in the classroom? How many teachers? Wondering about how the teachers manage roles and work together. What is the population the center serves? How do the race/ethnicity, languages, and abilities of the children and teachers influence relationships and interactions? What are the staff's

concerns, if any, about the child pictured? Does the staff recognize the child's strengths and build on them? How can you enter the setting and observe without interfering?

Now that we've thought about where consultation takes place, let's spend some time thinking about HOW the IECMH approach is delivered.

So what does it mean to engage in a consultative process or use a consultative approach? (PAUSE for 3 seconds) To begin with, it means that a consultant takes a number of steps when entering a new setting or situation. These include: establishing mutual expectations about the work to be done, gathering information, considering the perspectives of all involved, facilitating goal development—including development of goals to support equity, support and assess progress, and support transition and ending. Why these steps? Well, for one, they help the consultant promote a shared understanding of the goals and purpose of the consultation; also, they allow for flexibility should the needs of the consultee change during the consultation. It is important that all individuals involved are clear on the goals, the progress toward those goals, and any changes that may be made along the way. And that all individuals can contribute to the development of the consultation plan.

This competency speaks to how the consultant carries themselves in the field and when engaging with consultees. It also speaks to how the consultant thinks about personal perspectives as well as the perspectives of others such as the infant or child, family, and staff in the context of consultation. Reflective practice will be covered in more detail in competency 4.

A competent IECMH consultant embodies the demeanor and skills of the consultative stance. This competency speaks to the consultant's way of being. As Jeree Pawl said, "How you are is as important as what you do." This slide lists the 10 elements of the consultative stance as developed by Kadija Johnston and Charles Brinamen in their indispensable book "Mental Health Consultation in Child Care: Transforming Relationships with Directors, Staff, And Families." Please take a minute to over these 10 elements.

Which element do you feel represents a strength of yours? Which element do you want to learn more about? Which element is an area you feel may be an area of growth for you? How do you see equity infused in each of these ways of being?

In addition to embodying the consultative stance, an IECMH consultant serves as an observer, listener, facilitator, problem-solver, and/or educator, depending on the situation, while at the same time maintaining appropriate professional boundaries as defined by discipline and scope of practice. As we've already noted, collaboration is at the heart of effective consultation. Comfort with the consultative stance comes as a consultant gains experience in the role and explores thoughts, reactions, feelings, and actions through reflective supervision. This competency is one that consultants work on throughout their tenure as IECMH consultants.

Consultation programs use three forms of supervision: clinical, reflective, and administrative. A competent consultant actively participates in clinical and/or reflective supervision that is characterized by a focus on interpersonal and systems issues—including values, beliefs, backgrounds, biases, assumptions, and experiences—and on infant, young child, and family dynamics. Consultants also willingly participate in regular administrative supervision that includes discussion of job-related responsibilities, work quality, documentation, data collection, and other relevant topics.

How do consultants deepen their knowledge and skills? (Brief pause). One way is through reflective supervision or consultation. And just what is reflective supervision or consultation? For our purposes, we can think about reflective supervision, as defined by Rebecca-Shahmoon-Shanok, as a relationship for learning. Ideally, as the consultant reflects with a qualified supervisor, the consultant increases their understanding of the interpersonal and systems issues that

emerge in consultative relationships. They will also have opportunities to focus on infant, young child, and family dynamics and to think deeply about the interactions between consultees, including teachers, administrators, service providers, family members, and consultants as well as the settings in which we are working.

Consultation is hard work. It can bring up many feelings for the consultant. And as noted, supervision is considered a relationship for learning about oneself and one's professional identity; testing assumptions; exploring issues related to equity, bias, and culture; and deepening knowledge about development, mental health, family dynamics and systems.

All of this growth, however, depends on the consultant's willingness to actively engage in the supervisory process. Take a moment to think about the words "actively engaged." (PAUSE 3 seconds) What do you envision? Some skills or actions that may demonstrate active engagement include coming prepared to the supervision sessions with notes or reflections from recent experiences; being open to exploring a variety of aspects of those experiences, including the consultant's own thoughts and feelings; and being comfortable using the reflective process to deepen awareness and understanding.

As in any mental health profession, professional standards and ethics are a very important part of the work.

At all times consultants follow discipline-specific codes of conduct, such as those related to social work or psychology degrees and licensure and carry out mandated abuse- and safety-reporting responsibilities when necessary. These standards can help guide a consultant to act on behalf of an infant's or young child's best interests, whether this is physical, emotional, or social. And the standards help ensure that the consultant sees part of their role as speaking for the infant or young child during times that their needs are not being heard or considered.

We can think back to the introduction of the role of the consultant and the ways in which this role differs from that of other mental health professionals. One way the consultant's role is different is that they focus more attention on developing collaborative relationships outside the mental health program, with other agencies and organizations.

Consultants understand that there are many kinds of assistance that infants, young children, and staff may need and that there may be other helpers working alongside consultants in programs. The competent consultant researches what the community offers infants and young children and seeks information about these resources, including identifying culturally responsive resources that align with infants' and young children's needs. The consultant establishes working relationships within those organizations so that when needs arise, personal outreach can facilitate the connection. Consultants recognize that consultation exists along a continuum of supports and services designed to improve outcomes for infants and young children and those who care for them. It is within the role of a consultant to foster positive outcomes through respectful collaboration.

Let's try a quick activity to practice using the consultative stance. For this activity, we will ask you to jot down some of your thoughts and feelings.

Take a moment to imagine you have just started working at Ms. Smith's Itty Bitties home childcare program. You arrive for a scheduled consultation one Monday morning at 9 am. This photo is the scene you come in to. Thinking about your role as an IECMH consultant, jot down your thoughts about working in this natural setting. What do we need to focus on when it comes to delivering consultation where children are? (Pause for 3 seconds)

Next jot down your own reactions to this room. What do you think is going on? What questions do you have and how, using a reflective collaborative process, might you take the next step to find out more? (Pause for 3 seconds)

Finally, take some time to consider and jot down what biases you recognize in yourself when looking at this scene? What cultural considerations are important to think about? How comfortable are you at this stage of your development as an IECMH consultant in addressing these topics? (Pause for 3 seconds)

These are some of the common questions that competent consultants ask themselves to understand and inform their work. You can think of this not as a linear process but rather as a feedback loop. For example, reflective inquiry leads to a hypothesis, which in turn leads to the need for more observation, and so on. An IECMH consultant learns to move fluidly across these pathways and achieves clarity through continuously engaging in this feedback loop.

This module provides a brief overview of the role of the IECMH consultant. Numerous resources are available to support a consultant's development in this competency. Some are listed on this slide.

Thank you for listening to this module. Please be sure to listen to the other foundational modules and browse our additional resources on the website.