

7. Programmatic Consultation

Welcome to module 7, Programmatic Consultation, in the Center of Excellence for Infant and Early Childhood Mental Health Consultation's (also known as IECMHC) introductory series on IECMHC competencies. This module provides an overview of the four competency areas and core skills associated with programmatic focused consultation.

Programmatic consultation focuses on support at the program level, such as a child care center, pediatric office, or home visiting program. Programmatic consultation can focus on the provider (e.g., staff, teacher, home visitor, pediatrician) or on family members (e.g., caregiver, infant or young child).

Programmatic consultation maintains a systemic approach and aims for program-wide impact through a focus on multiple issues that affect the overall quality of an early childhood education (or ECE) program or service-delivery system. In thinking about an ECE program, the consultant works to enhance programmatic functioning by: helping program administrators and/or staff consider their program's equitable and inclusive practices, and overall social and emotional climate, and resolve issues that affect more than one infant or young child, family, and/or staff member.

The Programmatic Consultation competency includes four areas. The competent consultant:

- 1) Understands and attends to program cultural context, design, and infrastructure.
- 2) Supports and facilitates program-wide approaches to supporting the mental health of infants and young children and families.
- 3) Engages in group facilitation.
- 4) Supports and facilitates plans for mental health support during crises or disaster.

In this module we will review the four core skills listed on this slide. To see the full list of competencies and skills, you can follow the [link](#) provided at the end of this presentation.

Let's consider the first programmatic consultation competency area:

Understands and attends to program cultural context, design, and infrastructure

One of the first activities of IECMHC is to start consultation services with an agreement outlining roles, scope of work, frequency, duration, and related issues.

As an example, Arizona's Smart Support program clarifies roles with their Letter of Commitment. In the letter, the consultation program creates a formal agreement with the ECE program director as the "head of household" and comes to an understanding about what the consultant's and the program's work together will look like. The consultant stresses that one of the core tenets of consultation is regularity, and the consultant wants the program staff to know they can count on the consultant to be at their center at the agreed-upon time as an example. The consultant hopes that staff will see consultant visits as a time to think together and work through dilemmas. The letter of commitment also lists the consultant's supervisor and phone number,

and it explains that supervisors reach out periodically to sites to check in and support the consultation services.

The letter of commitment shares information about the role of the consultant, including its parameters and limitations. The letter explains that the consultant will discuss the consultation services with his/her supervisor(s) in order to increase the effectiveness of the services. The supervisor will also hold in confidence all information pertaining to consultation services. Exceptions to confidentiality are suspected child abuse and neglect, harm to self, or imminent harm to others.

The letter of commitment is also used as an opportunity to start goal planning. The consultant asks the “miracle question”: “if your center was exactly the way you wanted it, what would that look like? What would be different?” From there the consultant sets the initial program goals and action steps. This starts programmatic consultation at the center.

Once there is a shared understanding of the consultant’s role, the consultant can focus more fully on learning about the program’s mission, organizational structure, and policies and practices.

There are several core skills within the competency area of “Understands and Attends to Program Cultural Context, Design and Infrastructure.” One skill competent consultants need is the ability to focus on policy and practice, that negatively impact the healthy social emotional development of infants and young children. This includes attending 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 (e.g., poverty and domestic violence). It is essential that consultants consider these and other factors that impact program staff and families in relation to child rearing, parenting, communication styles, and developmental expectations.

IECMH consultants have a unique opportunity to observe up close as well as with a wide-angle lens.

Consultants may notice that infants and young children or families with whom they are consulting are treated differently from one another. Often this differential treatment is influenced by implicit bias. Implicit bias is defined as “bias that results from the tendency to process information based on unconscious associations and feelings, even when these are contrary to one’s conscious or declared beliefs.” As leading researcher on implicit bias in early care and education, Walter Gilliam, states, “We all have them. Implicit biases are a natural process by which we take information, and we judge people on the basis of generalizations regarding that information.”

Gilliam's research on differential disciplinary practices in ECE programs found that teachers appeared to expect challenging behaviors more from young black children, and specifically black boys, than from their white peers. U.S. Department of Education and Health and Human Services data find that young children of color — especially young black children — are expelled and suspended from their ECE program at a much higher rate than their white peers. It is important to note that no data or research supports young black children or other young children of color exhibiting more frequent or more severe misbehavior than their white peers. Further, research has found that socioeconomic status does not account for the racial disparities observed in patterns of disciplinary actions. Indeed, when researchers control for income, race is still a predictor of exclusionary discipline.

It's important for consultants to be aware of this research and to create opportunities for open dialogue with consultees about discriminatory disciplinary practices. The nature of implicit biases is that we are unaware of them, and sometimes a kind and empathic spotlight from a trusted consultant can propel growth and new perspectives.

The key to programmatic consultation is the ability of the consultant to elicit and explore multiple perspectives in understanding concerns within a program. A competent consultant also works to support this level of understanding across program staff. Often a consultant can be particularly helpful when staff are not communicating well.

For example, imagine consulting to a classroom where young children are exhibiting challenging behaviors. You observe the classroom and confirm with teachers that some of the children need help regulating their emotions. And you also notice that the teachers in the classrooms have totally different perspectives on what is going on in the classroom and seem to barely communicate with each other. A skilled consultant can bridge this divide and help the staff gain the skills they need to communicate effectively with each other.

By supporting staff's ability to understand others' perspectives, the consultant can help staff work together to develop mutual goals and achieve solutions.

The second category of competencies for programmatic consultation requires that consultants facilitate program-wide approaches to supporting the mental health of infants and young children and families. This competency focuses a consultant's attention to:

- Collaborating with other early childhood providers working with the program.
- Sharing information about resources and best practices and approaches for healthy social and emotional development.
- Providing guidance on resources used by the program.

Some programs that consultants work with have a multitude of support among external program partners, as well as internal program resources. In other cases, the consultant may be the sole resource professional.

So how do consultants make sure services are aligned with other early childhood supports and not duplicating or contradicting each other? This requires intentional collaborative efforts.

For example, in Arizona's provision of consultation to the ECE program, the consultant has monthly systems meetings with managers who represent other programs that support program staff. These meetings provide a chance for managers and staff to update each other on their programs and to network and collaborate. This way, if any conflicts arise, managers know they can contact the consultant for resolution. In addition, quarterly collaboration meetings for all technical assistance providers at individual programs are required by the state. Participating in these meetings provides a chance for all helpers involved with a center, including the consultant, to review program goals and identify ways to work together to support related goals. These meetings also enable participants to put faces with names and increase overall teamwork at the center. Further, the meetings help to clear up any territorial misunderstandings.

The third competency area for programmatic consultation is engagement in group consultation. This area highlights the ability to facilitate group processes that support staff in working toward goals, which requires attending to and managing complex group dynamics. Facilitating group processes also requires perspective taking; communication; and the ability to support respectful relationships, interactions, and teamwork.

Consultants may find themselves facilitating meetings among various individuals with ties to an ECE program. This slide shows a few example groupings.

Here is one example of a consultant using perspective taking, communication, and her ability to support respectful relationships, interactions, and teamwork. The consultant was tasked with forming and facilitating meetings of reflective groups.

She was consulting with an ECE program on Tribal lands in Arizona. She had already been providing child-focused consultation, classroom consultation, and programmatic consultation simultaneously for over a year with great success, especially considering the size and scope of the center. However, she was one lone consultant at a center with 22 classrooms. She brainstormed with her supervisor about a way to have more reach at the center, and with her supervisor's support and the ECE program director's blessing, she formed weekly reflective groups for the program's preschool teachers. The center had resources that allowed teachers to take time away from the classroom to participate in these meetings. It was decided that there would be two groups; one for the three-year-old classroom teachers and one for four-year-old classroom teachers.

Because the consultant had become trusted, she was able to build a remarkable level of teacher buy-in. She began the groups by creating group norms, which helped build a strong relationship between the group members. To continue to build this trust and develop a safe space for reflection, she first elicited from the group discussion topics. Self-care, communication, and developmentally appropriate practice were the initial topics. After a few months, the meetings had become a safe reflective space, and participants moved to reviewing videos of their classrooms together. They processed their observations and reflected on their responses and actions. This was the "meat" of the meetings and required that teachers have a high level of trust and a strong sense of self to allow them to be vulnerable and open to processing their own teaching practices with their peers. They all participated and grew as a result of the experience. The meetings continued for the course of a school year or about nine months.

The fourth competency area for programmatic consultation is supporting and facilitating plans for mental health support during crises or disasters. Consultants are often in the right place at the right time to assist with facilitating the creation of plans for mental health support during these situations. To help programs be prepared for crises or disasters, consultants need to:

- Link programs to appropriate resources that help with plan development, as well as resources that can be used in the instance of a crisis or disaster.
- Provide guidance as to how to implement crisis drills.

- Anticipate potential negative impacts of crises or disasters on infants and young children and staff, and proactively establish plans to address concerns.

All are impacted when a crisis or disaster occurs at a program. However, it is vital for consultants to recognize the nature and parameters of their role during crises. In many instances, the consultant serves as a bridge to link the program to community resources, which are better able to support the needs of program staff and infants and young children. It is also important to consider the timing of the consultant's entry or re-entry into a program impacted by crisis or disaster and how this timing will affect program staff and infants and young children.

It is important to hold all this in mind during a crisis or disaster, particularly how the crisis or disaster may impact infants and young children. Consultants can help program staff and caregivers convey developmentally appropriate explanations to young children about what has happened. It is helpful to be aware of children's books that explain crises to young children, and if possible, to bring the books to programs as needed. Consultants can use children's books as way to give young children a narrative for the situation.

This module provided a brief overview of the competency areas and core skills required for the seventh competency. Numerous resources are available to support a consultant's development in this competency. Some are listed here 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.