

Equity Domain

The Equity domain consists of action steps program leadership can take to advance equity at all levels of their Infant and Early Childhood Mental Health Consultation (IECMHC) program. Culture, biases, assumptions, and environments all shape relationships and behaviors, and influence settings and communities in important and meaningful ways. Every individual who is part of the IECMHC system has an important role to play in dismantling racism and promoting fair, positive, and equitable learning experiences and environments for infants, young children, and families. Completing this module will help program teams better determine what they need to implement to advance equity throughout their consultation program.

Resources for this domain: [iecmhc.org/resources-for Equity](https://iecmhc.org/resources-for-equity).

Instructions

It is best to complete the PPRT as a program team, rather than working through it independently. The PPRT is designed to foster collaborative discussion and reflection that will lead to strategic action.

Users are advised to use the “opt out” rating sparingly, if at all.

If the volume of tasks feels overwhelming, please remember to prioritize action steps and pursue them incrementally according to your program’s needs and resources.

Ratings

- **Completed (C).** Use this rating if the program has completed this action step.
- **In progress (I).** Use this rating if the program has started to work on this action step but has not finished yet.
- **Assistance needed (A).** Use this rating if the program is unclear as to how to complete this action step or needs more resources or support to complete it.
- **Not yet begun (N).** Use this rating if the program has not yet started to work on this action step but is interested in doing so in the future.
- **Opt out (O).** Use this rating if the program is not planning to pursue this action step.

Sub-domain 1: Developing an IECMHC Program-wide Strategic Plan

Objective: Determine how to ensure equity at all levels of the program

ACTION STEP	SUPPLEMENTAL GUIDANCE	RATING
1.1 Develop a strategic plan for advancing equity and reducing disparities within program practices, policies, and procedures.	For example: • Create a clear program mission and/or position statement about the commitment to advancing equity. • Include diverse key stakeholder groups (staff, leaders, and community members, as appropriate) in the development of the program mission and/or position statement and strategic plan. • Conduct a Racial Equity Impact Analysis (REIA)* of program practices, policies, and procedures to identify disparities and root causes in program policy or professional development; incorporate findings into the strategic plan as actionable steps with goals, benchmarks, and timelines to remedy identified gaps. • Develop policies that specify the roles of program staff and leaders in mitigating disparities based on race, ethnicity, culture, language, gender, disability, socioeconomic status, sexual orientation, and other considerations. • Review the strategic plan periodically to monitor progress using data and amend as needed. • Disseminate the strategic plan to program staff and key stakeholders including consultee organizations, community-based organizations, and the board of directors. • Ensure that program marketing materials reflect its commitment to equity. • Ensure that onboarding, orientation, and continuous training and professional development opportunities include an explicit focus on advancing equity, in line with data and the strategic plan.	C I A N O
1.2 Develop a strategic plan for supporting consultees the program serves in advancing equity and reducing disparities (consultee equity).	The strategic plan should: • Prioritize the foundational goal of equity in IECMHC to promote fair, positive, and equitable learning experiences for infants, young children, and families and the IECMHC program's commitment to work in partnership with the programs served to achieve this goal. • Be concrete and include specific actions and responsible parties to advance equity internally and externally in the community and with consultees. • Be shared with staff, leaders, teachers, and families from the programs served, as well as with partner organizations. • Be reviewed periodically to monitor progress and amended as needed.	C I A N O

ACTION STEP	SUPPLEMENTAL GUIDANCE	RATING
1.3 Have procedures and protocols in place that promote equity throughout the program (procedural equity).	For example: - Integrating questions specific to addressing equity and reducing disparities in all needs assessments and implementation plans. - Requiring that all marketing materials explicitly state the program's commitment to equity as a foundational goal in IECMHC. - Intentionally embedding equity training in the onboarding process for new staff and in ongoing professional development activities. - Incorporating discussions on equity issues into reflective supervision.	☐ C ☐ I ☐ A ☐ N ☐ O

Notes: Use this space to identify which areas are In progress (I) and Assistance needed (A). With your team, develop a plan, discuss the challenges, and decide how you will address them.

Sub-domain 2: Staff Training

Objective: Learn how to infuse an equity focus into trainings

ACTION STEP	SUPPLEMENTAL GUIDANCE	RATING
2.1 Consultants and supervisors receive initial and ongoing training in equity with skilled facilitators/trainers.	Topics should include issues on systemic racism, implicit bias, inclusion of infants and young children with disabilities, supportive services for dual-language learners, building authentic relationships with families, and disparities in outcomes that result from inequities in opportunity and resources. Use the following training resources on the CoE website to support professional development: - IECMH Consultant Training and Support Guide for Onboarding of New Hires - The Equity section on the CoE website, including the Equity in IECMHC Webinar Series and the Racial Equity Toolkit, which includes a list of resources to advance equity in IECMHC. CoE website: www.iecmhc.org/resources IECMH Consultant Training and Support Guide for Onboarding of New Hires: www.iecmhc.org/resources/training-and-support-guide Equity section: www.iecmhc.org/resources/equity Equity in IECMHC Webinar Series: www.iecmhc.org/resources/sets/2020-equity-in-iecmhc-webinar-series Racial Equity Toolkit: www.iecmhc.org/resources/coe-equity-toolkit	☐ C ☐ I ☐ A ☐ N ☐ O

ACTION STEP	SUPPLEMENTAL GUIDANCE	RATING
2.2 Ensure that equity trainings are led by skilled equity, diversity, and inclusion facilitators/trainers.	Trainings should: • Begin with consultants' and supervisors' self-examination of their own and others' values, beliefs, backgrounds, privilege, biases, assumptions, and experiences, and their effects on perceptions of behavior, expectations, and decision-making. • Highlight the history of race and racism and its manifestations in child-serving systems that are grounded in data. • Deepen understanding of concrete strategies to ensure meaningful and full inclusion of infants and young children with disabilities. • Deepen consultants' and supervisors' understandings of issues of culture, including cultural norms in child rearing, the connection between culture and language, and biases associated with cultural norms.	C I A N O
2.3 Consultants address and infuse equity and disparity topics into trainings provided to consultees.	The consultant shares the foundational goal of equity in IECMHC to promote fair, positive, and equitable learning experiences for infants, young children, and families with program leaders and staff and works with the program to identify and address professional development needs. Training topics might include: • The effects of systemic racism, discrimination, bias, prejudices, and microaggressions on infant, young children, and family well-being. • Implicit and explicit bias and its effects on perceptions of behavior, expectations, and decision-making. • Examination of personal values, beliefs, backgrounds, privilege, biases, assumptions, and experiences, and their effect on interactions and relationships with infants, young children, families, and colleagues. • The role of culture in shaping interactions and relationships, family structures, child-rearing norms, behaviors, and infant and young child development. • Analyzing and using disaggregated data to identify and track potential disparities in both opportunity and disciplinary practices. • Understanding equity in policy and building capacity to identify the disparate impact of policies on infants and young children.	C I A N O

Notes: Use this space to identify which areas are In progress (I) and Assistance needed (A). With your team, develop a plan, discuss the challenges, and decide how you will address them.

Sub-domain 3: Service Population and Service Delivery

Objective: Understand how to create and support consultees' efforts toward achieving inclusivity

ACTION STEP	SUPPLEMENTAL GUIDANCE	RATING
3.1 The program's IECMH consultants reflect the population served, and/or the program is taking specific steps to recruit a more diverse range of consultants.	Recruit and/or post job announcements in places that serve and/or are accessed by BIPOC and immigrant communities, as well as people with disabilities. For example: • Graduate schools at historically black colleges and universities; Hispanic-serving Institutions; and tribal colleges and universities • Culturally diverse social work associations such as NABSW, ALLSWE, NAPRHSW • National Pan-Hellenic Council • Community-based organizations and religious organizations. historically black colleges and universities: sites.ed.gov/whhbcu/one-hundred-and-five-historically-black-colleges-and-universities/ Hispanic-serving Institutions: www.hacu.net/assnfe/CompanyDirectory.asp?STYLE=2&COMPANY_TYPE=1%2C5 social work associations such as NABSW: www.nabsw.org/ ALLSWE: www.allswe.com/ NAPRHSW: www.naprhw.com/ National Pan-Hellenic Council: nphcq.com	C I A N O

ACTION STEP	SUPPLEMENTAL GUIDANCE	RATING
3.2 The program encourages caregiver/family communication and engagement in IECMHC through consultant training, supervision, program manual instructions, and other means.	Consultants support consultee staff in their efforts to: • Speak with families in their preferred languages and use culturally responsive professional interpreters when same-language communication is not an option. • Apply a strength-based vs. deficit-based perspective to infants, young children, and families who are from historically marginalized communities, by committing to learning about authentic community strengths and adaptive responses to poverty, historical trauma, and other racialized experiences. • Understand how race/ethnicity, preferred language, culture, abilities, disposition, and life circumstances (e.g., historical/racialized trauma, poverty, domestic violence) influence the infant's, young child's, or family's experiences and the program's or other settings' and systems' roles in hindering or supporting wellness. • Ensure that referrals meet the diverse needs of families, with consideration given to issues concerning resources, experienced racism and discrimination, culture, and language.	C I A N O
3.3 The program incorporates cultural and linguistic considerations in consultant training, supervision, program manual instructions, and other efforts.	For example: • Implement developmentally and culturally appropriate strategies to ensure that learning experiences are meaningful, relevant, and respectful of infants, young children, and families, and adapt classroom-level practices and routines to ensure continuity of care and culture between home and the early care and education (ECE) setting. • Evaluate the efficacy of program-level intervention strategies and revise them as needed to ensure that they are effectively meeting identified goals for infants, young children, and families, while respecting and responding to family culture, and values.	C I A N O

ACTION STEP	SUPPLEMENTAL GUIDANCE	RATING
3.4 The program incorporates considerations for infants and young children with disabilities through consultant training, supervision, program manual instructions, and other efforts.	- Consultants provide training for consultees on the importance of early identification for early intervention and preschool special education services, strategies to promote infants' and young children's social-emotional development, and policies and practices that support the full and meaningful inclusion of infants and young children with disabilities. - Consultants work with consultee program leadership to identify, analyze, and use disaggregated data to track potential disparities in positive learning opportunities and disparities in infant and young child outcomes, including those related to disciplinary practices.	C I A N O
3.5 The program supports consultants in their efforts to advance equity through consultation.	Consultants are well-trained and prepared to: - Build consultees' understanding of racial equity, bias, inclusion, language, and culture. - Analyze data to identify differential treatment, disparities in outcomes and other examples of inequity, and use data to inform practice change. - Identify concrete strategies to increase awareness of bias and mitigate its effects on practice.	C I A N O

Notes: Use this space to identify which areas are In progress (I) and Assistance needed (A). With your team, develop a plan, discuss the challenges, and decide how you will address them.

Sub-domain 4: Reflective Supervision

Objective: Learn how to provide reflective supervision that builds self-awareness related to equity, inclusion, and diversity

ACTION STEP	SUPPLEMENTAL GUIDANCE	RATING
4.1 Reflective supervision and reflective activities intentionally and continuously explore equity.	Consultants reflect with supervisor and colleagues on how: • One's cultural identities (e.g., gender, race, class, religion, sexual orientation, immigration status) might influence consultative relationships. • Opportunities to be a voice for equity in one's organization and in the broader community can be used. • Personal experiences with racism, classism, sexism, able-ism, homophobia, xenophobia, and/or other systems of oppression impact their provision of diversity-informed and culturally attuned services. • Systemic racism manifests within and across systems and affects infants, young children, and families, and how to effectively communicate this to consultees. • Infants', young children's, and families' intersecting identities and interactions across systems can compound disadvantage. • To maintain awareness of inequities within the systems in which IECMHC occurs and consider these contexts when seeking to understand factors that promote or hinder the process of change. • To support consultees in understanding the impacts of these equities and inequities.	C I A N O
4.2 Reflective supervision and reflective activities intentionally and continuously explore bias.	Consultants reflect with supervisor and colleagues on how: • Personal values, beliefs, backgrounds, privilege, biases, assumptions, and experiences come into play when they are working in a supportive role with consultees. • Personal values, beliefs, backgrounds, privilege, biases, assumptions, and experiences play a role in influencing infants' and young children's behavior. • Culture, values, beliefs, and bias affects their interactions and relationships, with infants, young children, and families. • To support consultees in understanding the impacts of bias.	C I A N O

ACTION STEP	SUPPLEMENTAL GUIDANCE	RATING
4.3 Reflective supervision and reflective activities intentionally and continuously explore family communication and involvement.	- Consultants reflect with supervisor and colleagues on how personal values, beliefs, backgrounds, privilege, biases, assumptions, and experiences impact relationships with infants, young children, and families, and on how to build authentic, culturally grounded relationships with them. - Consultants support consultee staff in their efforts related to the item above, and help consultees integrate ideas, activities, and resources that infuse MH principles into the daily routines and interactions of a particular home or classroom that respect and respond to families' culture (including beliefs concerning child-rearing norms), language, and values, to support continuity of care and culture between home and the ECE setting. - Create letters, trainings, and materials that are culturally responsive to the needs of caregivers and are in their preferred languages.	C I A N O

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Sub-domain 5: Data Collection

Objective: Understand how to include an equity focus in research and analysis

ACTION STEP	SUPPLEMENTAL GUIDANCE	RATING
5.1 Collect demographic data about all IECMHC participants (e.g., infants and young children, administrators, families, home visitors) to allow for equity analyses, including on suspension and expulsion.	This includes ensuring that: - Data, including infant and young child outcome data, are disaggregated and analyzed by race, ethnicity, gender, language, disability, and other factors to identify potential differential impacts/disparities across groups. - Data, including teacher practices and opportunities offered to infants and young children to engage and build relationships with teachers, are tracked and disaggregated. - Data are used to develop and implement actionable policies that support positive and equitable experiences for all infants, young children, and families in programs served. Note: Disaggregation refers to the breaking down of data into smaller groupings, often based on characteristics such as sex, family income, or racial/ethnic group.	C I A N O

ACTION STEP	SUPPLEMENTAL GUIDANCE	RATING
5.2 Ensure that measurement or assessment tools are valid and reliable for the groups of infants and young children in the program and that research questions are culturally relevant and informed by the consultees and families served.	• Select measures of the constructs of interest by considering their cultural appropriateness and validity (i.e., has the measure been normed with a sample that is similar to the program's in terms of language, race/ethnicity, or tribal community). • Translate findings into families' and/or consultees' preferred languages and discuss them with families and consultees, with an emphasis on how the findings inform action or service improvement. Note: Normed or normative data is data from a reference population that establishes a baseline distribution for a score or measurement and against which the score or measurement can be compared. Normative data is typically obtained from a large, randomly selected representative sample from the wider population.	C I A N O

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