

Program Planning and Reflection Tool: Equity Domain

This equity domain of the PPRT consists of action steps a program’s leadership can take to help determine how to advance equity at all levels of the 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 Infant and Early Childhood Mental Health Consultation (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. Advancing equity is a foundational goal of IECMHC. Completing this domain will help leadership determine what they need to implement to advance equity at all levels of their program.

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. Each subsection of this module lists several action steps for the team to consider and assign a rating that indicates the extent to which the program has implemented that action item. The rating system is below. Users are advised to use the “opt out” rating sparingly, if at all. Throughout the module, the supplementary guidance column offers best practice tips, resources and examples to help programs thoroughly understand and make plans, as needed, for each action step. Within each module, there is space for programs to jot down notes or reflections to help program planning move forward.

As a final note, the PPRT provides a detailed framework of recommended action steps in each domain. Depending on your program’s developmental stage, you may find that many of the tasks have already been completed, or you may discover that there is still much to do. 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.

To access an interactive version of the PPRT, visit www.iecmhc.org/pprt/intro. To access additional resources to support program implementation, visit www.iecmhc.org/resources/.

Ratings

For each of the action items in this section, please use the ratings below to indicate the program’s progress so far related to determining its IECMHC sustainability strategies.

C – Completed. Use this rating if the program has completed this action step.

I – In progress. Use this rating if the program has started to work on this action step but has not finished yet.

A – Assistance needed. 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.

N – Not yet begun. 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.

O – Opt out. Use this rating if the program is not planning to pursue this action step.

1. Developing an IECMHC Program-wide Strategic Plan: Determine how to ensure equity at all levels of the program.

Rating	Item #	Action Step
	1	<p>Develop a strategic plan for advancing equity and reducing disparities within program practices, policies, and procedures. For example,</p> <ul style="list-style-type: none"> ● Create a clear program mission and/or position statement about its 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 an examination^[1] of program practices, policies, and procedures to identify disparities and its root causes in program policy or professional development; findings are incorporated into the strategic plan as actionable steps with goals, benchmarks, and timelines to remedy identified gaps. ● Develop strategic plan policies that identify 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 is amended 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 onboarding, orientation, and continuous training and professional development include explicit focus on advancing equity, in line with data and the strategic plan. <p>Ensure that program marketing materials reflect its commitment to equity.</p> <hr/> <p>^[1] <i>Racial Equity Impact Analyses (REIAs) are opportunities to assess a practice, policy, structure, and/or system based on how equitable the outcomes are for various groups. There are a variety of tools and processes used in the field already, as can be found in the following group's websites and toolkits: Race Matters Institute, Race Matters Toolkit, The Annie E. Casey Foundation, and Race Forward Racial Equity Impact Assessment Toolkit.</i></p>

	2	<p>Develop a strategic plan for supporting consultees the program serves in advancing equity and reducing disparities (consultee equity). For example, the strategic plan should:</p> <ul style="list-style-type: none"> • 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.
	3	<p>Have procedures and protocols in place that promote equity throughout the program (procedural equity). This includes,</p> <ul style="list-style-type: none"> • including questions specific to addressing equity and reducing disparities in supporting the social-emotional well-being of infants and young children in all needs assessments and implementation plans. • explicitly include the program's commitment to equity as a foundational goal in IECMHC in marketing materials. • intentionally embedding equity training in the onboarding process for new staff and in ongoing professional development. <p>incorporating discussions on equity issues into reflective supervision.</p>

Use the space below to identify which areas that are **I – In progress** and **A – Assistance needed**, with your team, develop a plan, discuss the challenges, and how you will address them.

2. Staff Training: Learn how to infuse an equity focus into trainings.

Rating	Item #	Action Step
	1	<p>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 <u>CoE website</u> to support professional development:</p> <ul style="list-style-type: none"> ● <u>IECMH Consultant Training and Support Guide</u> ● for onboarding of new hires. ● The <u>Equity section</u> on the COE website, including the <u>101 Webinar Equity Series</u> and <u>Racial Equity Toolkit</u>, which includes a list of resources to advance equity in IECMHC.
	2	<p>Ensure that equity trainings are led by skilled equity, diversity, and inclusion facilitators/trainers. Trainings should:</p> <ul style="list-style-type: none"> ● 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.

	<p>3</p>	<p>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 professional development needs to achieve this goal. Trainings may include the following topics:</p> <ul style="list-style-type: none"> ● 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.
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3. Service Population and Service Delivery: Understand how to create and support consultees' efforts toward achieving inclusivity.

Rating	Item #	Action Step
	1	<p>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. The program may use the following recruitment strategies:</p> <ul style="list-style-type: none"> ● Reach out to organizations that serve black, Indigenous, people of color (BIPOC), people with disabilities, and immigrant communities to recruit potential candidates. These may include but are not limited to: <ul style="list-style-type: none"> ○ Graduate schools at historically black colleges and universities and Hispanic-serving Institutions. ○ Tribal colleges and universities. ○ National Association of Black Social Workers. ○ National Pan-Hellenic Council. ● Posts job announcements in places accessed by BIPOC communities, people with disabilities, and immigrant communities. These may include but are not limited to those listed above as well as the following: <ul style="list-style-type: none"> ○ Community-based organizations. ○ Religious organizations.
	2	<p>The program encourages caregiver/family communication and engagement in IECMHC through consultant training, supervision, manual instructions, and other means. Consultants support consultee staff in their efforts to:</p> <ul style="list-style-type: none"> ● 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.

		<p>Ensure that referrals meet the diverse needs of families, with consideration given to issues concerning resources, experienced racism and discrimination, culture, and language.</p>
	3	<p>The program incorporates cultural and linguistic considerations in consultant training, supervision, manual instructions, and other efforts. Consultants support consultees in their efforts to:</p> <ul style="list-style-type: none"> • Speak with families in their preferred languages and use culturally responsive professional interpreters when same-language communication is not an option. • 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.
	4	<p>The program incorporates considerations for infants and young children with disabilities through consultant training, supervision, manual instructions, and other efforts.</p> <ul style="list-style-type: none"> • 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. • Consultant works 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.

	<p>5</p>	<p>The program supports consultants in their efforts to advance equity through consultation.</p> <ul style="list-style-type: none"> ● Consultants facilitate consultees' understanding of racial equity, bias, inclusion, language, and culture. ● Consultants are competent in using data to identify differential treatment, disparities in outcomes, and other examples of inequity, and they use data to inform practice change. ● Consultants identify concrete strategies to increase awareness of bias and mitigate its effects on practice.
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Use the space below to identify which areas that are **I – In progress** and **A – Assistance needed**, with your team, develop a plan, discuss the challenges, and how you will address them.

4. Reflective Supervision: Learn how to provide reflective supervision that enhances self-awareness related to equity, inclusion, and diversity.

Rating	Item #	Action Step
	1	<p>Reflective supervision and reflective activities intentionally and continuously explore equity. Consultants reflect with supervisor and colleagues on how:</p> <ul style="list-style-type: none"> ● 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 leveraged. ● 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.
	2	<p>Reflective supervision and reflective activities intentionally and continuously explore bias. Consultants reflect with supervisor and colleagues on how:</p> <ul style="list-style-type: none"> ● 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.

	<p>3</p>	<p>Reflective supervision and reflective activities that intentionally and continuously explore family communication and involvement.</p> <ul style="list-style-type: none"> ● Consultants reflect with supervisor and colleagues on how: <ul style="list-style-type: none"> ○ Personal values, beliefs, backgrounds, privilege, biases, assumptions, and experiences play a role in relationships with infants, young children, and families. ○ To build authentic, culturally grounded relationships with infants, young children, and families. ● Consultants support staff in their efforts related to the two items above items, and help consultees: <ul style="list-style-type: none"> ○ Integrate ideas, activities, and resources that infuse mental health principles into the daily routines and interactions of a particular home or classroom that respects and responds 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.
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Use the space below to identify which areas that are **I – In progress** and **A – Assistance needed**, with your team, develop a plan, discuss the challenges, and how you will address them.

5. Data Collection: Understand how to include an equity focus in research and analysis.

Rating	Item #	Action Step
	1	<p>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:</p> <ul style="list-style-type: none"> • Data, including infant and young child outcome data, are disaggregated^[1] 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.
	2	<p>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.</p> <ul style="list-style-type: none"> • Select measures of the constructs of interest by considering their cultural appropriateness and validity (i.e., has the measure been normed^[2] 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.

Use the space below to identify which areas that are **I – In progress** and **A – Assistance needed**, with your team, develop a plan, discuss the challenges, and how you will address them.

^[1] Disaggregation refers to the breaking down of data into smaller groupings, often based on characteristics such as sex, family income, or racial/ethnic group.

^[2] 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.