CENTER OF EXCELLENCE FOR
Infant & Early Childhood
Mental Health Consultation
Growth. Advancement. Impact.

Sample IECMHC Logic Model for Home Visiting

Context/Setting:

There are high rates of maternal depression among home visiting recipients, which can be a barrier to positive outcomes for families.

IECMHC Receipients:

Direct: Home visitors

Indirect: Parents and infants/toddlers

Inputs/Partners/Resources:

- Funding to hire, train, support, and supervise qualified experienced infant and early childhood mental health consultants
- Partnership with home visiting program

Outputs/Activities:

- Individual or group consultation with home visitors
- Training for home visitors
- Mental health screening and assessment guidance
- Co-led home visits

Mediators/Moderators:

Mediators:

- Consultant-home visitor relationship quality

Moderators:

- Dose of consultation
- Home visitor and parental buy-in

Short-term Outcomes:

- Increased home visitor understanding of mental health and confidence in discussing mental health concerns with families
- Increased home visitor reflective capacity
- Decreased home visitor burnout and turnover
- Increased likelihood that families will stay engaged in program until completion

Long-term Outcomes:

- Reduced maternal depression and stress
- Strengthened maternal-infant attachment

Theory of Change:

If home visitors are better prepared to address mental health concerns with the families they serve, child and family outcomes will improve and home visitors will experience less stress and burnout.

Center for Infant and Early Childhood Mental Health Consultation©