# Infant and Early Childhood Mental Health Consultation—Competency Self-Assessment

Over the last decade, infant and early childhood mental health consultation (IECMHC) has emerged as an effective and evidence-based strategy to promote young children’s positive social and emotional development and behavioral health. IECMHC has also been shown to play an important role in helping to prevent, identify, and reduce the impact of mental health problems among young children and their families.

Increasingly, states, tribes, communities, and programs have adopted IECMHC in early care and education settings as well as in other settings typically frequented by young children and their families (pediatric offices, hospitals, homeless shelters, etc.). Several states, tribes, and regions have a long history of successfully implementing IECMHC and have developed their own guidelines related to job-related qualifications, education, and training.

A first version of IECMHC national competencies was developed by Georgetown University Center for Child and Human Development faculty and colleagues in 2015 as part of a training and technical assistance grant from the Office of Head Start, provided under the auspices of the National Center on Health. The IECMHC competencies presented here represent the second edition of national competencies for IECMH consultants. They include a review from a wider number of professionals in the field and a fine editing of the language offered in the 2015 version.

These competencies represent an important step toward building a national consensus on the array of foundational skills, knowledge, and abilities needed to be a highly qualified IECMH consultant. They focus primarily on competencies related to IECMHC in early childhood education and home visiting (ECE/HV) programs. However, they can be extended to apply to other settings where IECMHC is conducted (e.g., pediatric settings, homeless shelters, child welfare programs).

The competencies are not meant to replace those that have been developed by local or state IECMHC programs. They can be used in two ways: to supplement, extend, or guide existing efforts to build a qualified IECMHC workforce, or to be of use in new efforts to create and support such a workforce in places where one does not yet exist. In addition, they may help to further distinguish guidelines connected to IECMHC from those that have been developed for interdisciplinary fields, such as infant mental health,[[1]](#footnote-2) and to clarify the difference between IECMHC and other types of services offered in support of young children and families.[[2]](#footnote-3)

These IECMHC competencies may also help to do the following:

* Influence the hiring, supervision, and evaluation of IECMH consultants
* Guide professional development, training, and coursework
* Promote enhanced quality and increased professional credibility of IECMHC

These newly developed IECMHC competencies should be viewed as a specialization of infant mental health competencies and other consultation competencies. They represent the most up-to-date compendium of attributes, knowledge, and skills needed to become a competent IECMH consultant. In addition, these competencies have been reviewed using an Equity Rubric to help ensure respect and inclusion for diverse populations. Ultimately, through refinements over time, they may be used to create increased clarity in the field, resulting in specialized training and enhanced or new financing mechanisms to support IECMHC in a variety of settings serving young children and their families. The competencies may also be the first step toward developing a national credentialing system and academic programs specifically designed to train IECMH consultants.

## List of Contributors to and Reviewers of the IECMHC National Competencies

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* Connecticut’s Early Childhood Consultation Partnership (ECCP), who generously shared their program’s competencies as an example of a strong statewide IECMHC program’s competencies; the ECCP competencies ([www.eccpct.com/Program/Workforce](http://www.eccpct.com/Program/Workforce)) served as a foundational resource in the development of these IECMHC national competencies
* The RAINE Group: Advancing Early Childhood Mental Health Consultation Practice, Policy and Research Group—IECMHC researchers and program developers who have met over the last several years and have worked on establishing consensus on the definition and nature of IECMHC
* Georgetown University Center for Child and Human Development’s Center for Early Childhood Mental Health Consultation
* Southwest Human Development, Harris Infant and Early Childhood Mental Health Training Institute, Phoenix, Arizona
* Infant-Parent Program, University of California, San Francisco
* The Kids Connects program, developed in Boulder, Colorado

## Competencies at a Glance

| ****Categories**** | ****Summary of Skills**** |
| --- | --- |
| Role of the IECMH Consultant | Understands and can convey how IECMHC is a mental health specialization that is distinct from other activities in which mental health professionals may engage. Demonstrates an ability to strengthen families’ and ECE/HV staff’s capacity to support the social, emotional, and relational health of children and families in a range of settings. Partners with families and ECE/HV staff in working to prevent mental health problems from developing or increasing in intensity and/or in responding effectively to existing mental health concerns. |
| Foundational Knowledge | Draws from a broad and diverse knowledge base to understand children, families, and ECE/HV staff and how they relate to one another. Turns to a variety of disciplines and theories to inform the direction of consultation. |
| Equity and Cultural Sensitivity | Describes and demonstrates how culture (beliefs, values, attitudes, biases, and experiences), equity, and environment shape relationships and behaviors, and how they influence settings and communities in important and meaningful ways. |
| Reflective Practice | Thinks about and questions personal influences and actions before, during, and/or after consultative interactions. Considers the influences on and perspectives of others (e.g., child, family, staff) in the context of consultation (i.e., “What must this experience have been like for the child, staff member, or parent?”). Promotes reflective practice with consultees, using this experience-based learning to support consultees’ professional growth and development. |
| Child- and Family-Focused Consultation | Collaborates with families and/or ECE/HV staff to understand and respond effectively to a child’s or parent’s mental health needs, behavioral difficulties, and/or developmental challenges. Partners respectfully with families and ECE/HV staff to understand the context and nature of a particular family’s life in order to enhance the child’s and family’s well-being |
| Classroom- and Home-Focused Consultation | Collaborates with families and ECE/HV staff to promote warm and trusting relationships, steady routines, and development-enhancing interactions that positively impact classroom and home climates. Explores how elements of classroom and/or family life can play a powerful role in supporting all children’s social and emotional development. |
| 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 ECE/HV setting. Works to enhance programmatic functioning by assisting ECE/HV program administrators and/or staff in considering the setting’s overall social and emotional climate and in solving issues that affect more than one child, staff member, and/or family. |
| Systems –Wide Orientation | Works within and across systems, integrating mental health concepts and supports into the environments where young children spend time. Maintains awareness of the systems within which IECMHC occurs, and considers these contexts when seeking to understand factors that promote or hinder the process of change. |

Self- Assessment

Use the self-assessment below to rate yourself on the IECMH consultant competencies. It is expected that you will have a range of knowledge and skills. In other words, it is not expected that you will be able to rate yourself "I understand and do this really well" for every core skill. Regardless of the number of years of your consultation experience, each consultant has areas of strength and areas of growth. The self- ratings in the self- assessment can assist you to determine your professional development needs. Items marked "I have no idea” and “I could use some help” might be a good guide to focus supervision, training, and/or additional reading.

1. Role of the IECMH Consultant

I am able to understand and can convey how IECMHC is a mental health specialization that is distinct from other activities in which mental health professionals may engage. I demonstrate an ability to strengthen families’ and ECE/HV staff’s capacity to support the social, emotional, and relational health of children and families in a range of settings. I partner with families and ECE/HV staff in working to prevent mental health problems from developing or increasing in intensity and/or in responding effectively to existing mental health concerns.

| Category | Core Skills | Self- Rating |
| --- | --- | --- |
| 1A. Distinguish IECMHC from Other Related Endeavors | 1A.1.I demonstrate an understanding of IECMHC as an indirect service that helps to build the reflective capacities and relational health of families, ECE/HV staff, and others who care for or provide services to young children. I can convey the difference between IECMHC and modes of intervention that involve direct mental health treatment for children and/or families. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1A.2. I understand and can convey the distinction between the role of the IECMH consultant and that of other professionals who support the development of ECE/HV staff and family capacities (e.g., professional development coaches, health service managers, health care consultants, home visitors, early interventionists, therapists, disability coordinators). | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1A.3. I embrace the idea that IECMHC focuses on promoting mental health and social and emotional development using a wide-ranging knowledge base that draws from numerous fields of study. (See “2. Foundational Knowledge” for further explication.) | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1B. Exhibit an Ability to Work in Natural Settings | 1B.1. I demonstrate an ability to work in natural settings, including homes and early care and education environments. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1B.2. I consider the influence of setting and organizational functioning on providers, families, children, and service provision. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1B.3. I suggest and/or support interventions that reflect the particular setting in which IECMHC is delivered, which may include programmatic and/or child- and family-specific activities. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1B.4. I offer consultation that reflects and respects the philosophy and model of the program in which IECMHC takes place and the community and cultural context in which that program resides and/or functions. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1C. Understand and Engage in the Consultative Process | 1C.1. I demonstrate an organized approach to the stages of the consultative process (e.g., entering the new environment, establishing mutual expectations for the work, gathering information from and the perspectives of all involved, facilitating the establishment of goals, supporting and assessing progress, righting the course of consultation when necessary, transitioning, ending). | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1C.2. I demonstrate an ability to support the emotional well-being and relational health of infants and young children, and the adults who care for them, and promotes a shared and accurate understanding of child, family, and provider needs. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1C.3. I maintain accurate and timely records, provides professional documentation, and engage in substantive data collection in accordance with a program’s or setting’s requirements. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1C.4. I recognize when additional mental health and/or other services are warranted, and am able to make appropriate and effective referrals across multiple systems. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1D. Embrace the Consultative Stance and Reflective Practice | 1D.1. I articulate the elements of the “consultative stance,”[[3]](#footnote-4) and demonstrate the demeanor and skills embodied by this stance. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1D.2. I demonstrate the ability to engage in a flexible and varied “use of self” based on the unique needs of a setting, its context, and the relationships involved (i.e., in a range of situations, is able to serve as an observer, listener, facilitator, problem-solver, and/or educator). | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1D.3. I recognize and maintain appropriate professional boundaries and role as defined by discipline (e.g., psychology, social work, counseling) and scope of practice. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1E. Deepen my Knowledge and Skills Through Active Participation in Supervision or Consultation | 1E.1. I actively participate in clinical consultation and/or reflective supervision that is characterized by a focus on interpersonal and systems issues and on child and family dynamics. I willingly engage in supervision that includes analysis of the dynamic interactions between participants (e.g., family members, teachers, administrators, service providers, consultants, institutions). I engage in explorations of the possible challenges to developmentally supportive activities. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1E.2. I participate in regular administrative supervision that includes discussion of job-related responsibilities, work quality, documentation, data collection, etc. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1F. Adhere to Ethics and Standards of Professional Conduct | 1F.1. I adhere to the ethics and standards of professional conduct (e.g., the National Association of Social Workers’ Code of Ethics), and, if licensed, adhere to the requirements for maintenance of licensure. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1F.2. I discuss confidentiality and the limits of confidentiality with ECE/HV staff and families at the start of services, and, as circumstances indicate, revisit these topics during the course of consultative work. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1F.3. I carry out the mandate to report suspected child abuse and neglect, and supports others in their responsibilities as mandated reporters. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1F.4. I seek continuing education experiences to enhance knowledge and skills, and stays apprised of new research, scholarship, and promising practices in IECMHC. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 1G. Collaborate Respectfully with Other Agencies | 1G.1. I establish and maintain partnerships with relevant child- and family-serving agencies within the community (e.g., those involving Early Head Start, Head Start, child care, family support, early intervention, mental health treatment, child welfare) in order to collaborate on behalf of children and families. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |

## 2. Foundational Knowledge

I am able to draw from a broad and diverse knowledge base to understand children, families, and ECE/HV staff and how they relate to one another. I turn to a variety of disciplines and theories to inform the direction of consultation.

| Category | Core Skills | Self -Rating |
| --- | --- | --- |
| 2A. Understand the Multidisciplinary Body of Knowledge that Informs Consultation | 2A.1. I appreciate and embrace multidisciplinary approaches to working with young children, families, non-familial caregivers, and ECE/HV staff, drawing on areas of study that include professional consultation, psychology, social work, health, behavior, early education, IECMH, family and/or systemic functioning, and organizational psychology. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2A.2. I understand that a child’s physical environment, experience of attachment, social relationships, culture, life circumstances (e.g., poverty and domestic violence), temperament, and developmental capacities all impact behavior and social and emotional well-being. I use this knowledge to support change in one or more of these realms to improve child outcomes. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2A.3. I understand mental health concepts and psychological processes related to adults and adult functioning (e.g., parallel process [how the relationship between an IECMH consultant and the staff or caregivers impacts the relationships between the staff or caregivers and the children and families], the ways in which experiences from a caregiver’s past and present can distort how a child’s behavior is interpreted, experiences of or responses to trauma). | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2A.4. I understand the impact of trauma (including historical trauma and family violence) on child and family development, and can educate others about. trauma-informed approaches as needed. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2A.5. I understand how the attitudes and behaviors of primary caregivers influence young children, and I work to ensure that parents and caregivers understand the potential of their influence. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2A.6. I understand the root causes of the disparities that exist in expulsion rates and disciplinary practices. I understand how discrimination negatively impacts the social and emotional well-being of young children and their families. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2A.7. I have a broad knowledge base of social and emotional curricula, screening tools, frameworks, and resources. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2A.8. I understand adult learning theory (i.e., concepts related to how adults learn best) as it relates to families and staff. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2A.9. I understand basic principles of organizational or systems psychology as they relate to the programs in which consultation takes place. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2A.10. I recognize and respect non-dominant ways of knowing, bodies of knowledge, sources of strength, and routes to healing within diverse families and communities.[[4]](#footnote-5) | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2B. Understand the Nature of and Influences on Development | 2B.1. I understand the importance of the development of self-regulation, social relationships, communication, representational thinking, and executive function abilities for school readiness. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2B.2. I understand the interplay of genes and experiences on development—that both the child’s constitutional nature (including temperament) and aspects of the environment (e.g., the functioning of parents and other caregivers, the presence of risk and protective factors) play a role in determining the course of development. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2B.3. I understand that development is a transactional phenomenon, within which young children experience attachment relationships with primary caregivers that play a critical foundational role in development. Understands the potential negative impact of parental history, multiple separations, relational disruptions, parental depression, and loss. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2B.4. I understand the potentially positive and protective role of siblings, peers, and group interactions on early development and emotional well-being. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2B.5. I understand typical and atypical growth and development of young children. Has an in-depth knowledge of the general sequence of developmental milestones in all domains, including those connected to cognitive and social and emotional development, communication, sensory-motor processing, self-regulation, physical development, and play. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2B.6. I recognize risk factors associated with trauma in regard to environmental, situational, and interpersonal contexts, and understands the role of protective factors in ameliorating impacts on the developing child and caregiver relationships. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2B.7. I understand the many ways in which current and historical inequities (racism, homophobia, sexism, able-ism, and other forms of institutional oppression) can negatively impact adult-child relationships and children’s development. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2C. Understand the Importance and Power of Culture | 2C.1. I understand and support cultural variations in development, child-rearing practices, and caregiver expectations. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2C.2. I recognize the biological, psychological, social, and spiritual context of culture and its influence on values, beliefs, child-rearing practices, child development, and social and emotional health and well-being. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2D. Understand the Importance of Self-Awareness and the Nature of Reflective Practice | 2D.1. I understand the importance of examining personal values, beliefs, biases, and experiences to ensure that misinterpretation or judgment is not imposed on others’ intentions and actions. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2D.2. I understand the impact of unconscious bias in interpersonal interactions. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2D.3. I understand the importance of assisting others in reflecting on and examining their own values, beliefs, assumptions, and experiences; supporting them in regulating their emotions; and helping them accurately perceive the meaning of others’ behavior (specifically, the behavior of children, families, and co-workers). | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2D.4. I recognize the value of remaining curious and attentive to visceral and emotional responses to consultees and families, and the importance of understanding these reactions as personal information to be processed and explored. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2D.5. I embrace the importance of seeking to understand the perspectives and experiences of others in the context of consultation. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 2D.6. I understand the importance of clinical supervision, consultation, and reflective supervision, and values them as critical components that support the provision of effective consultation. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |

## 3. Equity and Cultural Sensitivity

I describe and demonstrate how culture (beliefs, values, attitudes, biases, and experiences), equity, and environment shape relationships and behaviors, and how they influence settings and communities in important and meaningful ways.

| ****Category**** | ****Core Skills**** | ****Self -Rating**** |
| --- | --- | --- |
| 3A. Demonstrate an Awareness of Diversity, Cultural Variation, and Normative Differences in Family Structure | 3A.1. I understand how culture (beliefs, values, linguistic expression, styles of communication, behavioral norms, and attitudes) shapes relationships, family structures, behaviors, and development. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 3A.2. I am able to define and demonstrate cultural sensitivity (including an understanding of issues related to linguistic diversity), and am able to describe its relevance to IECMHC. Appreciates culture as a source of resilience. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. understand and do this really well |
| 3A.3. I demonstrate an appreciation of the unique values and beliefs of each family and each family’s structure, and can work effectively with children and families from a range of cultural backgrounds. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 3A.4. I demonstrate the skills to identify and address implicit bias in practice. Identifies and can effectively discuss program, local, state, or other system policies that disproportionately disadvantage one group of children or families (including expulsion and suspension policies and language access). | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 3A.5 I can identify specific strategies to address inequities in practice and in systems. Can support others to recognize and address inequities. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 3A.6. I demonstrate the ability to explore and negotiate cultural differences, to value and adapt to the diverse cultural contexts of programs and communities served, and to work effectively with individuals, groups, organizations, and systems that vary in cultures, perspectives, and priorities. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 3B. Demonstrate the Capacity for Self-Awareness | 3B.1. I explore personal background, attributes, knowledge, and skills in a way that enhances the effectiveness of consultation in diverse communities. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 3B.2. I demonstrate the capacity for self-awareness in regard to cultural issues (i.e., the ability to recognize how culturally influenced experiences shape personal and professional behavior and attitudes, including those connected to how interactions with others unfold and are perceived). | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 3B.3. I demonstrate the capacity to recognize and address personal biases (including potentially implicit bias). | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 3B.4. I demonstrate the ability to recognize personal limitations in knowledge of particular cultures, and seek to gain a greater understanding. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 3C. Promote Cultural Responsiveness in Practices, Policies, and Procedures | 3C.1. I support ECE/HV staff in speaking with families in their preferred language and in using culturally responsive professional interpreters when same-language communication is not an option. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 3C.2. I work with programs to promote cultural sensitivity so that language and culture are respected, families are provided with culturally and linguistically appropriate materials, and staff are offered training opportunities focused on increased cultural responsiveness | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 3C.3. I support the capacity of others to work cross-culturally with the goal of positively influencing practice, policymaking, administrative functioning, and service delivery. Works to systematically involve families, key stakeholders, and communities in these efforts. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 3C.4. I demonstrates the capacity to help ECE/HV staff recognize and assess their own implicit biases. Assists others to explore how biases may inadvertently influence perceptions and behavior. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |

## 4. Reflective Practice

I think about and question personal influences and actions before, during, and/or after consultative interactions. I consider the influences on and the perspectives of others (e.g., child, family, staff) in the context of consultation (i.e., “What must this experience have been like for the child, staff member, or parent?”). I promote reflective practice with consultees, using this experience-based learning to support consultees’ professional growth and development.

| ****Category**** | ****Core Skills**** | ****Self- Rating**** |
| --- | --- | --- |
| 4A. Use Self-Reflection to Enhance Consultation | 4A.1. I understand, value, and can describe the importance and benefits of reflective practice. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 4A.2.I regularly reflect on personally held values, beliefs, biases, and assumptions as they influence interactions, relationships, and the directions that consultation may take. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 4A.3. I reflect on personal biases and can recognize when biases may negatively impact effective consultation. Works to explore personal implicit biases, and takes steps to make objective decisions. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 4A.4. I reflect on culture, values, and beliefs and on the personally experienced impact of racism, classism, sexism, able-ism, homophobia, xenophobia, and/or other systems of oppression in order to provide diversity-informed and culturally attuned services.[[5]](#footnote-6) | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 4A.5. I use self-reflection to maintain awareness of thoughts, emotions, and visceral reactions that regularly inform and can enhance the quality of consultative work. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 4A.6. I reflect on and explores a wide variety of approaches to working with staff, families, and children, and understands that there is no one correct strategy (nor any “quick fixes”) in regard to possibilities for change and growth. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 4B. Assist Others in Reflecting | 4B.1. I encourage staff and families to become aware of behaviors that stir up strong feelings and reactions, and assists them in identifying the origins of those responses so that they can respond to families, caregivers, and/or children compassionately and effectively. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 4B.2. I support staff and families in understanding how their values, beliefs, experiences, and feelings—along with factors connected to specific settings—have a role in influencing children’s behavior. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 4B.3. I seek to engender curiosity through carefully timed, nonjudgmental inquiry. I use listening, patience, and reflection to encourage others to explore possibilities for approaching challenges and supporting growth and well-being. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 4B.4. I collaborate with others to explore how they can regulate their emotions, engage in self-care, reduce stress, strengthen coping mechanisms and resilience, and aim for life balance even in the face of difficult circumstances. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 4B.5. I provide individual and group opportunities for staff to engage in reflection in regard to personal values, experiences, ethics, and biases when they are working in a supportive role with families. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 4B.6. I assist others in reflecting on the strengths and limitations of the setting in which they work or live (e.g., an agency, classroom, program, or home) and to explore how that setting impacts possibilities for and approaches to supporting children, families, and/or staff. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |

## 5. Child- and Family-Focused Consultation

I collaborate with families and/or ECE/HV staff to understand and respond effectively to a child’s or parent’s mental health needs, behavioral difficulties, and/or developmental challenges. I partner respectfully with families and ECE/HV staff to understand the context and nature of a particular family’s life in order to enhance the child’s and family’s well-being.

| ****Category**** | ****Core Skills**** | ****Self- Rating**** |
| --- | --- | --- |
| 5A. Value and Promote the Power of Relationships and the Importance of Relationship-Building | 5A.1. I demonstrate an ability to honor family strengths, perspectives, and expertise, and assists others in valuing and supporting family relationships as the first and primary relationships in a child’s life. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 5A.2. I support ECE/HV staff in developing trusted and respectful relationships with families. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 5A.3. I gather (or supports ECE/HV staff in helping to gather) family- and child-related information in a manner that is nonthreatening, respectful, collaborative, and supportive. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 5A.4. I facilitate understanding, mutual respect, and direct communication between families and ECE/HV staff and among members of the ECE community. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 5A.5. I engage warmly and flexibly with ECE/HV staff and families in order to consider the meaning of a particular behavior. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 5B. Work Collaboratively to Understand a Child’s Behavior | 5B.1. I collaborate with families and ECE/HV staff to develop a working hypothesis about the meaning of a child’s behavior, including social and emotional, relational, cultural, and family factors; physical and/or medical issues; environmental factors and setting events (such as a history of exposure to trauma); and/or developmental vulnerabilities that may play a role in that behavior. I recognize the need to revise that hypothesis, over time, as new information emerges and in the face of conflicting and/or additional information. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 5B.2. I demonstrate an ability to pay close attention to the relationships and interactions between ECE/HV staff, family members, and the child—and between that child and his or her peers—and to consider how those interactions may impact child and family well-being. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 5B.3. I consider and encourage others to consider information from families (including information about family history and culture), from ECE/HV staff and from observations and documentation (e.g., health records, anecdotal notes, assessments, reports). | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 5B.4. I use a variety of observation strategies, tools, and recording techniques to gain insight into a child’s behavior and the relational influences on his or her functioning. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 5B.5. I help families and ECE/HV staff understand all the influences on their view of the child (e.g., cultural, historical, and interpersonal factors; exposure to trauma; programmatic and bureaucratic issues). | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 5C. Support and facilitate Plan Development and Implementation | 5C.1. I integrate information and, considering both context and available resources, collaborates with ECE/HV staff and families to develop a plan that addresses child, family, and ECE/HV staff needs in a culturally sensitive manner. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 5C.2. I assist and support families and ECE/HV staff so that collaboratively developed plans for children involve interventions that reflect best practice (i.e., are developmentally appropriate and, when possible, evidence-based). | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 5C.3. I work in collaboration with other service providers to support families and ECE/HV staff (e.g., Part C, Early Intervention). | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 5D. Support and Facilitate Referrals, Service Provision, and Community Collaboration | 5D.1. I partner with ECE/HV staff and families in order to identify and facilitate appropriate referrals for specific children and families, whether in regard to medical, developmental, mental health, and/or other needs. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 5D.2. I work to see that referrals meet the diverse needs of families, with particular consideration given to issues concerning resources, culture, and language. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 5D.3. I establish and maintain positive relationships with other professionals and agencies within the community, tribe, or state, and collaborates (or helps ECE/HV staff to collaborate) with all parties involved to facilitate referrals and coordinate services. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |

## 6. Classroom- and Home-Focused Consultation

I collaborate with parents and ECE/HV staff to promote warm and trusting relationships, steady routines, and development-enhancing interactions that positively impact classroom and home climates. I explore how elements of classroom and/or family life can play a powerful role in supporting all children’s social and emotional development.

| ****Category**** | ****Core Skills**** |  |
| --- | --- | --- |
| 6A. Promote Secure and Supportive Relationships Between Children and Adults | 6A.1. I help families and ECE/HV staff deepen their understanding of how the quality of adult-child relationships impacts the way that children experience themselves in various settings, learn expectations, and understand how to interact and get along with others. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 6A.2. I help families and ECE staff understand and use (or, in the case of HV staff, support families in using) the power of positive relationships and adult-child interactions to support growth and development. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 6A.3. I offer insight into the role of positive sibling, peer, and group interactions in promoting children’s growth and well-being. Supports families and ECE/HV staff in promoting, fostering, and/or engaging in such interactions. Suggests, as needed, a range of strategies that promote successful give-and-take with peers. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 6A.4. I support the development of and addresses impediments to positive relationships between (1) families and ECE/HV staff, (2) ECE team members, (3) ECE teachers or providers and ECE administrators, and/or (4) HV staff and their peers and supervisors. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 6B. Support Families and Staff in Understanding the Nature of Development and Possibilities for Developmental Support | 6B.1. I share information about how young children learn and develop in a way that families and ECE/HV staff can understand, embrace, and use. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 6B.2. I foster families’ and ECE staff’s abilities to promote and facilitate (or, in the case of HV staff, to help families facilitate) the development of children’s relational capacities and social and emotional mastery, including their capacities for connection, self-regulation, communication, problem-solving, and impulse control. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 6C. Support Families and Staff in Providing or Encouraging Consistent Routines and Developmentally Appropriate Interactions and Practices | 6C.1. I support families and ECE staff (or, in the case of HV staff, helps staff to support families) in initiating, modifying, and/or supporting routines in order to promote safety and consistency. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 6C.2. I collaborate with families and ECE staff (or, in the case of HV staff, helps staff to collaborate with families) to promote practices and interactions that are responsive to the needs of individual children and groups of children. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 6D. Foster a Deepened Understanding of Mental Health Issues and Related Interventions | 6D.1. I assist ECE/HV programs and staff in selecting, suggesting, and/or implementing observation strategies, tools, assessments, and recording techniques to gain insight into the functioning and social and emotional climate of homes or classrooms. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 6D.2. I help families and ECE staff to integrate (or, in the case of HV staff, helps staff support families in integrating) ideas, activities, and resources that infuse mental health principles into the daily routines and interactions of a particular home or classroom. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |

## 7. Programmatic Consultation

I maintain a systemic approach and aims for program-wide impact through a focus on multiple issues that affect the overall quality of an ECE setting. I work to enhance programmatic functioning by assisting ECE program administrators and/or staff in considering their setting’s overall social and emotional climate and in solving issues that affect more than one child, staff member, and/or family.

| ****Category**** | ****Core Skills**** | ****Self -Rating**** |
| --- | --- | --- |
| 7A. Understand and Attends to Program Design and Infrastructure | 7A.1. I Initiate consultation services with an agreement outlining roles, scope of work, frequency, duration, etc. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7A.2. I establish a relationship with the program leadership in a manner that supports their ability to champion social and emotional wellness in center functioning; to promote the relational health of children, families, and staff; and to foster children’s healthy social and emotional development. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7A.3. I learn about a program’s organizational structure, including staff roles and responsibilities and lines of authority. I share information about the role of the consultant, including its parameters and limitations. I use established pathways to engage members of the organization as indicated. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7A.4. I become familiar with and work within a program’s mission and policies, especially those impacting staff development, family engagement, and positive behavioral supports. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7A.5. I pay particular attention to program policies that may disproportionately disadvantage certain groups of children, such as children of color or dual language learners. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7A.6. Facilitate the discovery of gaps between policies and program practices that impact the provision of a healthy social and emotional climate and that are related to child outcomes. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7A.7. I identify factors (including policies, practices, leadership style, and professional development) that influence the social and emotional climate of a center or program. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7A.8. I evaluate the efficacy of program-level intervention strategies, and revises them as needed. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7A.9. I elicit and explore multiple perspectives in understanding concerns within a program, encourages the development of clear lines of communication between program staff, and represents the perspective of consultees to others across all levels of the institutional hierarchy. Fosters solutions that build collaborative relationships and support common goals. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7A.10. I facilitate effective interventions to address relational difficulties that are negatively impacting the mental health climate of a program. I understand interpersonal dynamics associated with diversity and inclusion issues (especially in regard to groups experiencing discrimination) and how they may manifest in conflicts, tensions, misunderstandings, and/or opportunities. I understand the context of the community in which a center functions, including factors related to its history, culture, language, values, capacities, etc. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7B. Support and Facilitate Program-Wide Approaches to Supporting the Mental Health of Children and Families | 7B.1. I coordinate with and among external quality enhancement efforts and internal program resources (e.g., instructional coaches, training and technical assistance efforts, program leadership). | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7B.2. I share information about resources and best practices in order to support programmatic decision making and effective implementation of center-wide approaches to healthy social and emotional development. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7B.3. I provide guidance related to resource selection and adaptation in a manner consistent with a specific program’s philosophy, needs, and culture. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7C. Engage in Group Facilitation | 7C.1. Facilitate group processes that support staff in working toward and maintaining a focus on established goals. Attend to and manages complex group dynamics. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7C.2. Promote perspective taking, communication, and/or activities that facilitate mutually respectful relationships, interactions, and teamwork. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7C.3. Offer direction during times of ambiguity, maintaining a focus on both promoting young children’s healthy social and emotional development and supporting caregivers’ capacities. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7D. Support and Facilitate Plans for Mental Health Support During Crises or Disasters | 7D.1. Facilitate or links programs to appropriate resources when developing and implementing plans to prepare for or respond to disasters or crises. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7D.2. Provide guidance related to the manner in which crisis drills are implemented. Consider developmentally appropriate explanations, procedures, advance preparation, and debriefing for staff, families, and children. Anticipate potential negative impacts of crises on individual children, and proactively establishes plans to address concerns. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 7D.3. Recognize the nature and parameters of the consultant’s role during crises, and is familiar with available crisis services. Consider the importance of the timing of the consultant’s entry or reentry into a center recently impacted by crisis. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |

## 8. Systems-Wide Orientation

I work within and across systems, integrating mental health concepts and supports into the cultures and environments where young children spend time. I maintain awareness of the systems within which IECMHC occurs, and considers these contexts when seeking to understand factors that promote or hinder the process of change.

| ****Category**** | ****Core Skills**** | ****Self- Rating**** |
| --- | --- | --- |
| 8A. Evaluate the Complexity of Working Within Multiple Systems | 8A.1. I demonstrate the ability to articulate basic concepts of systems theory, and understand how they inform the process of IECMHC. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 8A.2. I demonstrate the ability to work concurrently within two or more systems, and understands that changes in response to IECMHC may influence multiple systems. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 8A.3. I work within and across systems, integrating mental health concepts and supports into the cultures and environments where young children spend time. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 8A.4. I consider the historical and cultural contexts of communities and their member, and recognize cultural influences on values, perspectives, and actions. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 8A.5. I demonstrate awareness of and sensitivity toward existing attitudes and strengths of community members (e.g., community leaders, agencies, service providers). | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 8B. Bridge Services to Promote Cohesion for Young Children and Families | 8B.1. I gain entry into and engage effectively with child-serving centers or programs where consultation services are delivered. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 8B.2. I maintain up-to-date information about community resources. Limits unnecessary barriers for families to obtain services by making effective referrals. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 8B.3. I establish relationships with professionals in other early childhood and mental health disciplines, including those providing counseling and treatment services. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 8B.4. I encourage networking between ECE/HV settings and programs and other child- and family-serving organizations within a community. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 8B.5. I use and share current information about standards (i.e., professional, program, and licensing standards), resources, and other child- and family serving systems. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 8C. Promote Mental Health and Social and Emotional Well-Being | 8C.1. Promote healthy social and emotional development through the creation and/or distribution of informational materials and resources that can be disseminated to a range of audiences, using a mix of methods informed by the community. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |
| 8C.2. Maintain visibility as a resource for promoting healthy social and emotional development and mental wellness. | 1. I have no idea 2. I could use some help 3. I'm ok at this 4. I understand and do this really well |

**Summary of My Self-Assessment**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| CATEGORY | SELF-  RATING SCORE | Core Skills:  “I Understand and Do Well”  Pick a Couple of Strengths | Core Skills:  “I am Not Sure About”  Pick a Couple of Areas to Grow | Action Plan:  Describe a strategy or two to Enhance your skills |
| **1.Role of the IECMH Consultant**  **(76 possible points)** |  |  |  |  |
| **2. Foundational Knowledge**  **(25 possible points)** |  |  |  |  |
| **3. Equity and Cultural Sensitivity (56 possible points)** |  |  |  |  |
| **4.Reflective Practice**  **(48 possible points)** |  |  |  |  |
| **5.Child- and Family-Focused Consultation**  **(64 possible points)** |  |  |  |  |
| 6**.Classroom- and Home-Focused Consultation**  **(40 possible points)** |  |  |  |  |
| **7. Programmatic Consultation**  **(76 possible points)** |  |  |  |  |
| **8. Systems-Wide Orientation**  **(48 possible points)** |  |  |  |  |

**Tribal Considerations**

Though some tribes will have IECMH consultants who are from the community and are tribal members themselves, due to both the newness of the IECMHC field and the general lack of IECMH consultants nationally, tribal programs may obtain the services of a consultant who is new to tribal work. In the latter case, programs can do some or all of the following to integrate a consultant into ongoing efforts to support young children and the adults who care for them:

Provide a cultural guide or mentor—someone the IECMH consultant can go to in order to ask questions, learn more about the community, and engage in ongoing reflection. A simple explanation of why things happen in a certain way may clear up potential misunderstandings, and consultants will appreciate the opportunity for guidance so they may avoid inadvertent errors. Consultants may also find their own previously held assumptions or perceptions shifting, and an opportunity to discuss, question, and ponder those assumptions and perceptions will support their personal development.

* Provide a tour of the community, including housing areas and the places most frequented by young children and their families (e.g., the Youth Center, the Family Resource Center).
* Provide the consultant with the history of the tribe or tribal community in question, and share any historical factors that may be relevant to the work the consultant will do. Knowledge of the historical context can aid consultants in understanding present-day dynamics. For example, information about the Indian Relocation Act and its consequences would be helpful for a consultant in an urban Indian Center.
* Provide the consultant with culturally based resources that would be appropriate for them to use. For example, if consultants are aware that a traditional dance troupe includes young children, they may recommend participation for a child who becomes better regulated by the proprioceptive input obtained from this type of physical activity.
* Increase the consultant’s awareness of potential referral sources by providing a list of tribal service providers and tribal child- and family-serving agencies, including wrap-around services and county-based services used by tribal families.
* If the consultant will provide program-level or organizational-level consultation, describe the governing structure of the tribe or Indian Center (e.g., Tribal Council, Governing Board, organizational divisions), and make clear how the program fits within this overall framework.

1. Korfmacher, J. (2014). Infant, Toddler, and Early Childhood Mental Health Competencies: A Comparison of Systems. Zero to Three [Website]. Retrieved from <http://www.zerotothree.org/public-policy/pdf/infant-mental-health-report.pdf> [↑](#footnote-ref-2)
2. U.S. Department of Health and Human Services, Administration for Children and Families. (n.d.). A Guide to Effective Consultation with Settings Serving Infant, Toddlers, and their Families: Core Knowledge, Competencies, and Dispositions. Retrieved from <http://www.acf.hhs.gov/programs/occ/resource/effective-consultation> [↑](#footnote-ref-3)
3. Johnston, K., & Brinamen, C. (2006). Mental Health Consultation in Child Care: Transforming Relationships with Directors, Staff, and Families. Washington, DC: Zero to Three Press. [↑](#footnote-ref-4)
4. Irving Harris Foundation. (2012). *Diversity-Informed Infant Mental Health Tenets.* Retrieved from <https://imhdivtenets.org/tenets/> [↑](#footnote-ref-5)
5. Irving Harris Foundation. (2012). Diversity-Informed Infant Mental Health Tenets. Retrieved from <https://imhdivtenets.org/tenets/> [↑](#footnote-ref-6)