Understanding Infant and Early Childhood Mental Health Consultation (IECMHC)

Narrator: You’re listening to a podcast from the Center of Excellence for Infant and Early Childhood Mental Health Consultation. Established by the Substance Abuse and Mental Health Services Administration (SAMHSA) in 2015, the Center of Excellence is a combined effort of SAMHSA, the Health Resources and Services Administration (HRSA), and the Administration for Children and Families (ACF).

The Center of Excellence’s mission is to support states, tribes, and communities in using Infant and Early Childhood Mental Health Consultation (or IECMHC) as a tool for promoting mental health and school readiness.

Cairone: I’m Karen Cairone, Technical Assistance Manager with the Center of Excellence. Today, we are talking with Dr. Jennifer Oppenheim, Senior Advisor on Early Childhood at SAMHSA, and the Project Officer for the Center of Excellence. Jen has been intimately involved with the creation of the Center of Excellence and the Infant and Early Childhood Mental Health Consultation (IECMHC) Toolbox since the very beginning. Jen also continues to be a guiding voice on the IECMHC field and how it can continue to grow.

Thank you, Jen, for being here today.

Oppenheim: Thank you, Karen. Happy to be here.

Cairone: So, Jen, in your work in Infant and Early Childhood Mental Health Consultation I’m sure you get asked the question on a regular basis, “What is IECMHC? What does it mean?” If you had thirty seconds or less, how would you answer?

Oppenheim: So, IECMHC is a way to support adults who care for babies and young kids to be best equipped to help these children develop in healthy ways. Consultation helps these adults have the skills to recognize when kids are having developmental or behavioral issues, get help to address these problems and interact with young kids in a way that promotes their healthy development, particularly their social and emotional development.
Cairone: Can you explain social and emotional development for our listeners?

Oppenheim: Sure. So this is the part of development that has to do with being able to build healthy relationships, to control or regulate emotions and behavior. As kids get older, they need to be able to identify their emotions, develop empathy with what other people are feeling. These are all really foundational skills that every person needs to be able to build friendships, to be able to listen, follow directions, pay attention in school. All things that are really critical and necessary for kids to get a successful start in life. Sometimes though, there are things that interfere with kids developing these skills, even very early on, and their behavior may indicate that some attention is needed to help them get back on track developmentally or help them be supported in some way.

So, to use a really simple and a common example, a toddler in a childcare center may be having tantrums and biting other kids when she gets frustrated and of course this is a concern for the center staff and often other families. A mental health consultant is someone who can come into the Center and talk to the teacher, observe the child, talk with the parents or the family members to get a good picture of what is going on and then work with those adults to figure out how best to respond to this child who is expressing something, communicating something with her behavior. It’s just not in a way that is working well for her or for those around her. And the consultant is helpful because there are many reasons why a child might act this way. She might have some kind of developmental issue that is impeding her language development and when she doesn’t have the words to express what she is trying to say, she bites. Or, she may be a child who gets very overwhelmed when there is a lot of noise and chaos around her and when she is in that kind of situation and has no idea how to get out of it, she reacts by biting.

These two scenarios would have very different responses, so the value that the mental health consultant brings is her mental health and child development expertise and her trained skills of observation and consultation. She can work with the parents and the teachers to come up with theory about what is going on and then help them develop some strategies for supporting the child and working through the problem.

Cairone: Can you provide an example of a strategy a mental health consultant might share in their work?

Oppenheim: So, one strategy might be some developmental testing that helps assess language development, if it seems like that what might be going on. Or it may be that the consultant works with the teacher to be able to watch for cues that this child is getting distraught by noise and chaos, and then creating a quiet, safe space for her to calm down before the biting occurs. It might actually be what they come up with is helping the teacher look at the environment in the classroom as a whole, and strategizing about how she might set things up a little bit differently so that there is more structure and less of that chaotic time in the day, and so that it works better for all the children in the room.
Cairone: Could you talk about how a child’s environment plays a role in social and emotional development, and IECMHC benefits parents and their children?

Oppenheim: So, to clear up one thing that sometimes is confusing, mental health consultation isn’t mental health treatment. It’s really a means for sharing knowledge about social and emotional development and mental health with the adults who have the biggest influence over young children’s development, who spend all of their time with young kids, and partnering with these adults to use skills and strategies that really help kids develop and behave in healthy ways. One really important thing that mental health consultants bring is the knowledge and the understanding that children’s behavior is very strongly influenced and shaped by the adults around them and by their environments. When the adults in a child’s life are struggling with mental health challenges of their own, for example, or other very real problems, this may well have an influence on the child’s development. So, mental health consultants can be really important people in terms of helping parents or home visitors or pediatricians, and then work together with the adults as a team to come up with strategies to make sure that the environment, and the adults in it, are as healthy as possible and that they are interacting with the kids in as healthy a way as possible. Sometimes mental health consultants play a role in helping parents get connected with treatment for a mental health issue or it may involve working with a home visitor or parent directly to really coach them to approach parenting in different ways. Maybe discipline in a new way or create routines in a different way and again, partnering with these adults who are taking care of kids and really testing out whether these strategies lead to better outcomes for everyone involved in ameliorating the behavior that’s the issue, relieving the stress on the adults, helping connect with other resources as those are needed.

Cairone: Thank you, Jen, for that explanation. I know the role of a consultant has a lot of facets and you cover the knowledge that they need to have, the experience, the observations that they conduct, the partnering, the support, helpful strategies and all of the ways that they really work to help the adults in a child’s life have better, long-term outcomes with their family and their child. And we have listeners of a lot of different levels that could have been doing this for a long time or just getting started with IECMHC, but I think the next question that I want to talk about is the long-term impact of Infant and Early Childhood Mental Health Consultation and I think it’s really good for us all to hear again and again what the long-term impacts are. So you could just share in your own words what you believe some of the biggest impacts are of the work?

Oppenheim: Sure. And I agree with you. This is a really important piece and a very exciting part because, in fact, we have more and more data that is demonstrating that mental health consultation leads to positive outcomes for kids and for adults. So, the most evidence that we have is for mental health consultation in childcare and preschool settings because that’s where the work has been going on the longest. There are studies now that show reductions in problem behaviors and improvement in social skills among preschool-aged children, improvement in the interactions between teachers and kids and improvement in climate in the classroom, and also decreases in teachers’ stress levels. Another really important outcome
of mental health consultation is a reduction in expulsions from preschool settings. This is super important because children are actually expelled from early childhood settings at even higher rates than they are expelled from kindergarten to 12th grade. Reductions in expulsions means fewer work days missed by parents, because when children are removed from their preschool classroom, that’s more stress and distress for families.

We have less research on Infant and Early Childhood and Mental Health Consultation in Home Visiting programs, but there are some really encouraging early findings and these include improvements in families’ engagement in Home Visiting programs. They are sticking with the programs longer when a mental health consultant is in place. Also, home visitors reporting that they get less burned out and are less likely to leave when they have the support of a mental health consultant. They feel they have a better understanding of children’s development and resources that are available to them to support children and families when they’ve had the chance to work with the mental health consultant.

Cairone: Great. Thank you, Jen. Could you please provide an overview of the Center of Excellence, which is where we are housing this infant and early childhood mental health work, and share what the Center of Excellence goals and services include?

Oppenheim: Sure. The primary goal of the Center is to advance the implementation of high quality Infant and Early Childhood Mental Health Consultation in states, tribes and communities across the nation, through developing tools, resources, training and technical assistance.

So what does that really mean? SAMHSA and our partners see the value of mental health consultation as an effective means of supporting caregivers of young children and equipping them to be able to promote kids’ healthy development and recognize when young kids are struggling with emotional or behavioral issues. But we also recognize that in most places in this country people who care for young children don’t know about mental health consultation. They don’t know what it is or how effective it can be and they don’t have access. Another problem is that in many places where they do know about mental health consultation and want to offer those services, the demand is greater than the supply. And that is, in part, because there are not enough professionals trained to be mental health consultants because being a consultant requires some very specific knowledge and skills.

So, part of the mission of the Center of Excellence is to raise awareness about this really effective approach to helping kids and adults, making sure that there are mental health consultation programs available in more places and, third, making sure that mental health specialists are getting the training they need to be able to deliver this service well.

And, finally, we want to do this in a way that will last. We want to help states, tribes and communities build a solid infrastructure that will allow these high quality services and programs to be put in place, and to remain there when they are working. We want to make sure that there are policies and financing mechanisms in place that allow this service to be delivered well, with good quality controls and sufficient funding. The mission of the Center is
to move the field and the country forward on all of these fronts. And the Center has three main mechanisms for doing this. The first is a website and a web-based Toolbox full of resources. The second are webinars and podcasts that are open to anyone and can be found on the website. And the third is a pilot training and technical assistance program that is offering support to twelve states and two tribal nations to help them build and expand their mental health consultation systems.

**Cairone:** So, Jen, on our first Center of Excellence webinar we had a question come in that was a very good question where we were speaking about promotion-based and prevention-based services and a participant on the webinar typed in a question and said, “What does promotion-based service even mean?” and it really grounded us, and helped us realize we need to make sure we are talking about things in ways that folks can understand, so could you share a little bit about Infant and Early Childhood Mental Health Consultation why it’s a promotion and a prevention-based service? And also what that means in terms of how it’s adopted and funded?

**Oppenheim:** Yes. That is a great question and I’m happy to speak to that point. I think it is a really important point that the purpose of mental health consultation and the Center is to promote the healthy social and emotional development of young kids, and prevent social, emotional and behavior issues or problems. So, that means a few things and I’ll try to unpack it a little bit.

First, mental health consultation can benefit all kids, because every human being needs to develop social and emotional skills. These are the foundations for good relationships, success in school and jobs, etc. So especially in childcare and preschool settings, mental health consultants give adults support and strategies to help them do the best possible job helping every child develop those critical social and emotional skills, so that’s promotion. Also in the context of Home Visiting programs, which we’ve been talking about, when home visitors and parents have a really good understanding about positive attachment between parents and babies and the ways that interacting with babies and young kids promotes their social and emotional development, that’s also promotion.

Mental health consultation is also a prevention-based service in two ways. First it helps teachers and home visitors and parents recognize early signs of behavioral or developmental issues and helps them figure out what’s going on and how to prevent those issues from escalating. So that’s prevention. And then the second aspect of prevention is when we know that someone is at higher risk for experiencing problems and we intervene to give them supports in order to prevent those negative outcomes.

**Cairone:** I’d like to shift now and head into the Center of Excellence Toolbox so that we can talk about a few of those sections in particular, and we are going to start with the Models section, so would you be able to describe with us or share for those who many not yet have a model for Infant and Early Childhood Mental Health Consultation in place, how would they get started by going into that section?
Oppehnheim: So, I have to say, I think the Models section of the Toolbox is just amazing. That said, what I wish was in the Models section is a menu of models that are nationally recognized, proven to be effective and ready to be adopted anywhere in the country, but unfortunately that is just not where we are yet in the field of Infant and Early Childhood Mental Health Consultation. There are models out there that work and the Toolbox does introduce listeners to several of them. But, as someone would see if they went to the Models section, we have a vision and a goal that in the not too distant future there will be consensus about, and widespread use, of fully articulated national models that can be adopted and implemented with fidelity. But since we are not there yet, with this consensus about national models that are proven, what the developers of the Toolbox, our national experts from around the country, have put together is absolutely the next best thing. And that is an Interactive Planning Guide for Developing and Implementing an Infant and Early Childhood Mental Health Consultation Model, which was created specifically for the Toolbox and it gives people a very straightforward and comprehensive multistep process for planning and adopting a mental health consultation model that is based entirely on the unique and particular needs, strengths and challenges of the listeners’ community, tribe or state. So that interactive guide involves eleven steps and includes many tools and resources to help the individual or a team go through each step, including feedback and recommendations along the way.

Cairone: We are going to go into the Competencies and Workforce sections of the Toolbox next. Could you explain a little bit how a beginner would use those two sections and begin to hire and build their workforce?

Oppehnheim: That is a great question. Let me say a little bit about what each of those sections of the Toolbox contain. The Competencies section has a very comprehensive and useful resource that lays out in great detail, and with a lot of specificity, core skills, knowledge and abilities that a highly qualified Infant and Early Childhood Mental Health consultant should have. So, this resource represents the culmination of many years of work with input from many experts in the field and it really is an important step and useful tool towards building national consensus on the array of competencies that are needed to be a highly qualified consultant.

This section can be really useful for someone who is wondering if they have the skills needed to work as a mental health consultant. It might be useful for someone who is trained in the mental health field and they are interested in seeking additional training to become a mental health consultant. And it could even be used by a mental health provider agency that wants to train some of their staff to be prepared to work as consultants.

Actually, a director of a childcare center or Home Visiting program who are trying to determine whether a proposed mental health consultant has the qualifications they are looking for, might also use this resource as a way to evaluate folks who are coming in for that position. I think this tool is really useful in terms of drilling down into some of the specific knowledge and skills that mental health consultants really need and the kinds of standards we
are trying to move towards, as a field, in terms of qualifications.

So, the Workforce Development module, on the other hand, really looks at this issue of preparing the workforce less from the perspective of an individual looking to ensure they have that knowledge and those skills they need, but instead provides information that can help those who are building mental health consultation programs at the state, tribal or community levels, to help them think about parameters for the supports and infrastructure they will need to put into place when it comes to training, supervision and ongoing support of their mental health consultation workforce.

One thing that is great about this section of the Toolbox is that it offers some examples from communities and states that have built mental health consultation systems and it shares some of their approaches and really, again, specific and concrete examples for this workforce development piece. Setting standards and expectations when it comes to qualifications of consultants, supervision, how much, by whom, orientation for mental health consultants and training opportunities, so I think that listeners might find that very useful in terms of their work to set up systems for their own community, state or tribe.

Cairone: So, Jen, you shared a lot of exciting information in this podcast. If our listeners are also getting excited and they want to know how IECMHC can begin in their community, tribe or state if they have five minutes right now to start digging into the Toolbox where would you suggest they get started?

Oppenheim: I have a couple of ideas. I would go to the Center of Excellence homepage and I would start by checking out some of the really excellent resources in the Getting Started section. Folks might be interested in the Crosswalk of Early Childhood and Mental Health Services and that helps clarify what mental health consultation is and is not compared to some other field. There’s also a short three and a half minute video, Setting Children Up for Success, that introduces the listener to the Center and the Toolbox.

The second thing I would actually recommend is if you scroll down even a little bit further on that page, you will find the section on promoting equity through your mental health consultation, and that might be interesting to people who are new to that topic. And it basically involves the recognition that a disproportionate number of children of color, and especially boys of color, are expelled from early childhood programs, and this is an issue that has been in the news a lot lately, and this section has a lot of resources that really delve into this topic, why these kinds of disparities exist and in particular how mental health consultation can play an important role in addressing this issue of equity and disparity.

And then the last thing I would suggest is if people are really new to the topic they might start with the about IECMHC page, which has just a super quick overview about the approach and then head from there into the Toolbox.

Cairone: Well, thank you, Jen. Thank you for all of your responses and your time and sharing all of your knowledge with us. This has been an excellent podcast and a great overview of
Infant and Early Childhood Mental Health Consultation.

Oppenheim: Well, thank you, Karen. It has been my great pleasure to talk with you.

Narrator: Thank you for listening to the podcast! For more on Infant and Early Childhood Mental Health Consultation, including the Center of Excellence Toolbox, which is a collection of over 60 original resources put together by the Center with experts in the field, please visit us at our website www.samhsa.gov/iecmhc. That’s www.samhsa.gov/iecmhc.

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