

# Ohio's Core Competencies

for Early Childhood  
Mental Health Professionals

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Ohio Child Care  
Resource & Referral  
Association

**Ohio**

Department of  
Mental Health

Dear Early Childhood Mental Health Professional:

We are pleased to introduce the *Ohio's Core Competencies for Early Childhood Mental Health Professionals*. This body of work underscores the importance of the healthy social and emotional development of young children and the integral part it plays in the Early Childhood Development system. This document serves as an initial effort to articulate Ohio's vision of the competent Early Childhood Mental Health (ECMH) Practitioner. With the publication and implementation of these competencies, Ohio joins a growing number of states leading the way for higher education and the potential for credentialing and/or certification of these early childhood mental health professionals. Additionally, we believe that these competencies will improve the quality of continuing professional development for all early childhood professionals.

Ultimately, we strive to increase the number of skilled ECMH Professionals in Ohio through the recruitment and training of early childhood mental health professionals. This is done by promoting collaborations with Ohio institutions of higher education to encourage the establishment of training programs offering a formal specialization and/or certification in early childhood mental health.

Ohio's Professional Development Network has been in the process of creating a series of core knowledge documents for a variety of early childhood professionals. This ECMH core competencies document aligns with OPDN's series and complements the social and emotional competencies for early childhood professionals.

The ECMH Core Competencies also aligns with an important Ohio Department of Mental Health strategic goal – to support the development of a qualified, diverse and culturally competent workforce within the mental health system.

We applaud the outstanding accomplishment of the ECMH Professionals Core Competencies Workgroup in developing this document and sincerely thank its members for their expertise, diligence and time.



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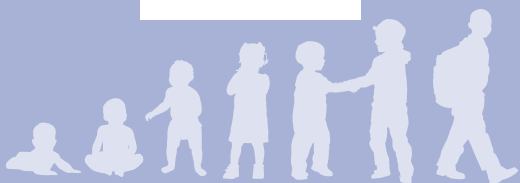
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# Introduction



## ***From Theory to Reality***

*Healthy social-emotional development in young children is acknowledged as increasingly important. As a result, professionals from related vocations including social work, counseling, developmental psychology, community mental health, early childhood care and education, and special education have attempted to put theory into practice.*

*A merging of these disciplines has created a new approach called Early Childhood Mental Health (ECMH).*

## **A Rapidly Growing Field**

Early Childhood Mental Health (ECMH) has seen a fast rate of growth over the last decade. This has occurred despite many ambiguities: a definition of ECMH, the professional criteria determining who may practice as an ECMH practitioner, and the basic skills and knowledge required to enter the field. Cohen and Kaufmann (2005), and Donohue, Falk, and Provert (2000) have provided the basic principles of the ECMH field. Many states are attempting to define the competencies needed to meet these principles. In Ohio, these efforts have been primarily led by the Ohio Department of Mental Health's Early Childhood Mental Health Initiative.

Inclusion and respectful teaming with the parents and/or caregivers are necessary for effective work with young children. An integral part of working with young children is the accessibility of ECMH services in a variety of settings in the community. Consequently, services to these children may consist of consultation as well as individual and family therapy.



This document of core competencies is for ECMH professionals who provide consultation and/or treatment.

Living in the 21st century requires professionals who work with children and their families to address multicultural diversity and pluralism. Social responsibility entails proactive consideration of race, multiple identities of children and their families, gender, socioeconomic status, religion, ability/disability, sexual orientation, etc. Additionally, professionals should become aware of their own perspectives by examining and managing their biases, privileges, and power advantages, especially when working with underprivileged and underserved populations.

The core competencies included in this manual are written to promote the professional development of knowledge, skills, and attitudes necessary for working with diverse populations.

This document serves as an initial effort to articulate Ohio's vision of the competent Early Childhood Mental Health Practitioner.

## Defining Early Childhood Mental Health

Ohio has adopted the Georgetown University Center for Child and Human Development definition of Early Childhood Mental Health. It recognizes both mental health consultation and therapy as problem-solving and capacity building interventions. These are defined as:

**Mental Health Consultation** – A collaborative relationship between a professional consultant with mental health expertise and one or more individuals with other areas of expertise or parenting responsibilities.

**Therapy** – Direct service utilizing therapeutic interventions including formal child mental health diagnostic evaluations, direct therapeutic services; therapeutic play groups, and one-on-one individual child support.

Consultation and therapy both require that practitioners have formal preparations in children's mental health and experience working with young children and their families.

Since 2000, Ohio has recommended that ECMH practitioners be licensed mental health professionals. This document is not meant to be a formal job description, but attempts to identify shared foundational competencies across disciplines.

## Document Goals

- To define how ECMH is similar to and different from other related disciplines.
- To provide existing ECMH practitioners in the state with a common language which can be used for advocacy efforts.
- To serve as a foundation for new professionals entering the field.
- To give a road map for professional development among Ohio's ECMH practitioners.
- To build capacity in Ohio by assisting institutions of higher learning in the development of programs to train additional providers.

# Guiding Philosophy

This document is guided by the philosophy that consultation and treatment are built on the same foundation. That's why the five ECMH domains address both practices without giving priority to either one.

Each domain has the capability to stand alone yet builds upon the other. This results in some duplication of knowledge, skills, and abilities. However, this purposeful replication only helps to strengthen ECMH professional development.

The five domains are:

- 1 Social-Emotional Growth & Development
- 2 Family & Community Relations
- 3 Assessment
- 4 Interventions
- 5 Professional Development

In addition to the five domains, this document also includes Guiding Principles and Values, which were adopted from other highly regarded publications by the ECMH Initiative early in its inception. These publications preceded this Core Competency document and served as a foundation for its development.



# Guiding Principles

A family-centered early childhood mental health service system is:

- Supportive of parents of young children by nurturing and building caring relationships with them.
- Supportive of non-parental caregivers of young children by nurturing and building caring relationships with them.
- Delivered, to the greatest extent possible, in natural settings – including homes, child care, health care, and family support settings.
- Respectful of developmental processes and is flexible and individualized to meet the behavioral health needs of young children.
- Sensitive to the cultural, community, and ethnic values of families.
- Accessible to caregivers, home visitors, family workers, and administrators working with infants, toddlers, and preschoolers and includes clinical services, case consultation and clinical supervision.

- Accessible to family services workers, home visitors and others working with families of infants, toddlers, and preschoolers and includes mental health program consultation, case consultation and back up support for families requiring more intensive interventions.
- Accessible to caregivers, home visitors, family workers, and administrators working with families of infants, toddlers, and preschoolers and includes clinical supervision and support in dealing with such staff issues as burnout, cultural, and work place conflicts.
- Accessible immediately and as necessary for crisis intervention and support to young children, families, and programs experiencing crises related to violence, community disasters or family-specific traumatic events.
- Built on partnerships among both primary and secondary support services at the community and state level.

*Adapted from Early Childhood Mental Health Services: A Policy and Systems Development Perspective, by Jane Knitzer, National Center for Children in Poverty, Columbia School of Public Health, 1998.*

## Values

- All young children deserve to spend their days in a safe, stable, caring, nurturing environment.
- To meet the mental health needs of very young children, it is necessary not only to consider the young child and his or her parents as individuals; it is also critical to consider the quality of the child's many relationships.
- Families are considered to be full participants in all aspects of the design, implementation, and evaluation of programs and services for their young children.
- ECMH services are responsive to the cultural, racial, and ethnic differences of the populations they serve.
- ECMH practices build upon, promote, and enhance individual, family, and early childhood staff strengths, rather than focus solely on weaknesses or problems.

*Adapted from Early Childhood Mental Health Consultation, by Elana Cohen and Roxanne Kaufmann, a Publication of CMHS, SAMHSA, USDHHS April 2000.*



## Aligns with Early Childhood Core Knowledge Series

Ohio's Professional Development Network has created a series of core knowledge documents for a variety of early childhood professionals. This Early Childhood Mental Health (ECMH) core competencies document aligns with OPDN's series, but is not an exact structural match.

The Professional Development Network series covers six core competency areas:

- 1 Child Growth & Development
- 2 Family & Community Relations
- 3 Health, Safety, & Nutrition
- 4 Child Observation & Assessment
- 5 Professional Development
- 6 Learning Environments & Experiences

A conscious choice was made by the ECMH writing team members to exclude Health, Safety, & Nutrition as ECMH professionals address this area in very limited ways compared to other early childhood professionals. Conversely, the members felt that Learning Environments & Experiences were so enmeshed in the work of ECMH professionals that it cannot be separated from the other competencies. Therefore skills and knowledge addressing Learning and Environments can be found in all of the Early Childhood Mental Health competency content areas.

## Acknowledgements

*Ohio's Early Childhood Mental Health Core Competencies* was developed by a passionate, knowledgeable and committed workgroup of ECMH professionals from around the state with a broad range of expertise and experience.

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# Domains



## The Five Domains of ECMH

The ECMH writing team strategically presents the five domain areas on the following pages in the specific order listed as each builds upon the other sequentially.

- 1 Social-Emotional Growth & Development
- 2 Family & Community Relations
- 3 Assessment
- 4 Interventions
- 5 Professional Development

## Building Blocks for the ECMH Practitioner

- A basic knowledge of typical social-emotional growth and development is seen as a critical foundation for anyone identifying as an ECMH provider.
- Providers must be proficient in using this foundational knowledge within the context of a child's family and community relationships.
- Once ECMH providers have knowledge and experience in basic social-emotional development within the context of a child's relationships, they then are able to develop the capacities necessary for assessing and intervening with children, families, and care providers.
- Finally, the competent ECMH professional will continually strive to be an ethical professional while continually developing his or her individual knowledge and that of the profession.





# Social-Emotional Growth & Development

## Rationale

Social-emotional growth and development is composed of five interrelated and interdependent components:

- 1 Capacity to form and sustain meaningful relationships
- 2 Self control and autonomy
- 3 Communication and self expression
- 4 Learning and acquiring knowledge
- 5 Coping and resiliency

These components develop gradually from early childhood through adolescence and mature in adult life. In infancy and toddlerhood the rudiments of the five components can be seen. By preschool age (3-4 years), these early beginnings have developed into much clearer and more detailed reflections of the five components of social-emotional growth and development.



## Competencies

- Understands that social-emotional growth is linked to brain development and understands how to use this information to create appropriate strategies and interventions for an individual child's learning style.
- Understands that healthy children acquire skills and abilities through the natural medium of play and at times play must be developed in order for the best results to occur.
- Understands and identifies the basic developmental sequences, stages, and milestones of social-emotional development in typical children.
- Understands child temperament and attachment in a broader context of family dynamics and systems.
- Understands the principles of growth and development of young children and their relationship to later wellness.
- Understands the impact of group environment and social demands on a young child's social-emotional development.
- Recognizes that families and caregivers are essential to promoting social-emotional growth and development of young children.
- Identifies the components of a rich environment that promotes healthy social-emotional development.
- Mentors families and caregivers to nurture young children's social-emotional growth and development.
- Describes societal influences (multiple identities, violence, drug use, exposure to trauma, etc.) and their possible impact on a child's social-emotional development.
- Demonstrates knowledge of the impact of risk factors (atypical family factors, teen parents, maternal depression, substance exposure in utero, family violence, etc.) to overall development.

# Family & Community Relations

## Rationale

Any discussion of social-emotional growth and development must begin with a child's capacity to form and sustain meaningful relationships. Nurturing relationships are pivotal in children's growth and development. From birth, children are social beings ready to respond to caretakers. Continuity of meaningful relationships becomes the basis for many other vital areas of growth. These related skills include the development of trust, self respect, respect for others, self reliance, autonomy, capacity to love oneself, love for others, and the ability to enjoy life. With ECMH assistance, children struggling with forming relationships can develop the skills necessary to allow them to more fully enjoy the company of others.

## Competencies

- Recognizes the quality of a child's early relationships in light of different cultural, religious and social norms.
- Establishes nurturing relationships with children, staff, and parents and adjusts behavior and practices based on social, cultural and religious expectations and norms of the family.
- Establishes partnerships with the family, involving them in all aspects of the program, including advocating for their own children both within the program and in the public sector.
- Communicates respectfully and responsibly with families, caregivers and colleagues by exhibiting warmth, using listening skills and demonstrating care and commitment.
- Respects families by valuing their opinions, nurturing their involvement and maintaining a relationship even when family opinion contradicts best practice or realistic possibilities.
- Supports and teaches families to act as advocates for their children.
- Assists with locating and increasing family and caregiver awareness of and access to mental health consultation in the community.
- Creates partnerships among and between professionals from different disciplines with parents/caregivers.



# Assessment

## Rationale

Assessment is a broad-based concept. In practice, the overall aim of assessment is to describe and make judgments as an aid to decision making. Descriptions take the form of data gathered by formal and informal measures, such as tests and observations of behavior or settings. Judgments take the form of interpretive conclusions about the meaning of data. The judgments may represent a conclusion about the past (such as what caused a problem), a statement about the present (such as how severe a problem is), or a prediction about the future (such as how much the problem will improve as a result of intervention). Assessment must be individualized to meet the needs and identify the strengths of the child, family and/or early childhood setting.

## Competencies

### Foundations and Principles

- Demonstrates knowledge of ECMH disorders, risk factors and attachment issues and uses data and assessments to develop appropriate plans for assistance.
- Provides guidance in selection, implementation and documentation of assessment methods as needed.
- Assesses environments (i.e. DECA reflective checklists, ECERS, etc.) and uses this information in a sensitive manner, discerning when assistance is needed or when differences are due to cultural or other factors.





## Gathering and Documenting

- Recognizes the need for additional assessment, refers for further evaluation and remains an active team member and information source.
- Recognizes ways to develop a relationship with a child before observation and assessment procedures are implemented. Can problem-solve when culture, developmental level, disabilities or other factors cause barriers to the child's comfort and security.
- Demonstrates the ability to seek information in a supportive and non-intrusive manner during the interview process. Utilizes family and caregiver knowledge about the child in a respectful manner.
- Works collaboratively and cooperatively with the family, caregivers and other involved specialists regarding assessment results.
- Gathers additional information when observation and assessment data is conflicting in nature.
- Uses specific standardized tools/best practice processes to assess social-emotional development in young children. This may include specialized techniques and assessments for children with developmental concerns.
- Integrates contributions from families and other professionals into observations, assessments and reports.
- Examines multiple factors including culture, environment and learning styles that may influence the observation and assessment data.

## Summarizing and Reporting

- Identifies, collects and interprets observation data utilizing knowledge of basic recording techniques to identify strengths and needs of the children/families and caregivers.
- Facilitates the sharing and reporting of observation and assessment results used to determine the next steps for an individual child in collaboration with family, caregivers and other professionals that may be involved.
- When appropriate, refers children to other community resources for further evaluation and remains an active team member and information source until additional assessments are completed.
- Communicates results to families in an appropriate, objective, understandable and supportive manner.
- Develops reports to be shared with family, caregivers, staff, administrators, and other involved professionals using communication avenues appropriate for each to receive a full understanding of the child's needs.
- Considers multiple factors including multiple identities, environments and learning styles that may influence the observation/assessment data. Provides additional supporting information when data from multiple sources is conflicting in nature.



# Interventions



## Rationale

Interventions are based on assessment results and are designed to produce outcomes that support positive social-emotional development. The ECMH professional will be competent in interventions that can occur with the individual child, family, and/or early care and education providers.

## Competencies

### Child

- Recognizes attachment and separation intervention theory as a basis for child/family interactions. Can develop strategies to strengthen relationships and maintain security both in the home and in learning environments outside the home.
- Recognizes and reinforces each individual child's strengths, building on these to heighten the child's capacity to manage their behavior.
- Understands best practices for treatment of young children, including behavioral interventions.
- Understands that challenging behavior has environmental and developmental causes and is able to use this information to modify the environment, activities, and expectations to improve behavioral outcomes.
- Understands the role of consultation as a prevention service that helps reduce the amount of personal/social difficulties later in life.
- Identifies children's developmental needs and implements responsive strategies.
- Applies direct observation and knowledge of children's development as a framework for therapeutic change.
- Provides support and guidance in consistent, non-threatening, and positive ways that reinforce feelings of competence and confidence.
- Models problem-solving skills in the context of children's interactions and play.
- Directly teaches and supports the development of a variety of social-emotional skills.
- Assists to enhance and adapt environments and experiences based on needs of individual children – including children with special developmental learning and/or emotional needs.
- Establishes working relationships with young children by approaching them with an attitude of interest, respect and value.
- Uses play-based interactions to support the child's development of problem-solving and social skills to both develop and extinguish behavior.
- Integrates activities and philosophies in group settings that infuse mental health principles.
- Implements best practice strategies to intervene with children who have been impacted by atypical early relationships.
- Creates and helps implement individualized child-, family-, and program-based intervention plans.
- Develops plans to match the child's individual developmental level, cognitive and language style, strengths and cultural attributes.
- Analyzes, evaluates, and applies current therapeutic research practices and implements changes to enhance children's growth and development – including practices from diverse disciplines working with young children.

## Family

- Recognizes attachment and separation behaviors and responds in a knowledgeable manner.
- Recognizes and provides information about how and when to access appropriate community resources. Problem-solves continued action when appropriate resources and supports cannot easily be obtained.
- Recognizes when outside consultation is needed and solicits and accepts this feedback in order to assist teams in meeting the needs of children and families.
- Understands family systems in intervention theory as a basis for child/family interventions.
- Understands the concept of resiliency and its application in home and community settings.
- Helps create environments and experiences that affirm and respect cultural and linguistic diversity.
- Helps create environments with appropriate supports that empower children to communicate, negotiate, and problem-solve including strategies for children with developmental issues, disabilities or language barriers.
- Assists families to understand and be aware of their own communication styles and helps them in developing other approaches if their intent is being misconstrued or not fully understood.
- Arranges opportunities for appropriate contact between families and the ECMH professional.
- Provides developmental guidance to assist parents in understanding their child's behaviors, developmentally appropriate expectations and discipline strategies.
- Provides mentoring, modeling, and empathy as supports to families to enhance their understanding of child development, temperament and strength-based interventions as applied to their own child.
- Provides education and consultation on the impact of temperament and attachment on children's social-emotional development in the broader context of family dynamics and systems.
- Demonstrates the capacity to create interventions based on knowledge of the impact that parental relationships, expectations, fears and hopes – as well as other stressors – have on the child's attachment with the caregiver.
- Communicates with children and models for adults in ways that facilitate relationship building.
- Interacts with families in a manner that communicates respect, highlights strengths and displays sensitivity to cultural diversity.
- Educates families and provides consultation about transitions and possible responses to them.
- Engages families as partners in the development of intervention plans, attending to the family's preferences regarding target behaviors, identified strengths, intervention strategies and desired outcomes.
- Coaches families on ways to nurture young children's social and emotional development.
- Empowers families to become independent problem-solvers capable of creating their own solutions to current and future problems as well as to actively advocate for their child and themselves.
- Develops and implements strategies to enhance attachment.
- Develops protocols for transition planning across settings. Can adjust scope, duration and other program practices for cases in which standard practices are not effective or supportive enough to assist the child, family or providers in the receiving program.





### Early Care and Education Caregivers

- Understands, utilizes and teaches others to use basic observation strategies, tools, and recording techniques.
- Recognizes how and when to access appropriate community resources and problem-solves continued action when appropriate resources and supports cannot easily be obtained.
- Helps caregivers to establish and modify programs that provide consistency, developmentally appropriate environments, expectations and responses based on a child's individual needs and specialized considerations.
- Helps to implement programs designed to enhance children's sensory processing and/or manage a child's sensory needs, including conferring with specialists.
- Helps create learning environments and experiences that affirm and respect cultural and linguistic diversity, promote resiliency, and support respectful relationships between home and school.
- Assists caregivers in understanding and being aware of their own communication styles.
- Helps enhance and adapt environments and experiences based on the needs of individual children – including those with special developmental learning and/or emotional needs.
- Helps caregivers integrate activities in group settings that infuse mental health principles throughout the child's daily schedule.
- Encourages caregivers to be reflective in assessing the curriculum, environment and child interaction patterns from the perspective of enhancing social and emotional development.
- Empowers caregivers to grow in their knowledge of the children in their care and to effectively apply this knowledge to their decision making and problem-solving processes.
- Uses a variety of approaches to effectively support the mental health of children/families in group settings.
- Utilizes and trains others to use and evaluate various social skills curricula and intervention models or approaches.
- Establishes a pattern of consistent and regular contact/accessibility between caregivers and the ECMH consultant based on the needs of the individual early childhood setting.
- Enhances the capacity of caregivers to effectively promote the social and emotional well-being of the young children in their care via relationship building, training, modeling, coaching and positive reinforcement.
- Provides training and consultation on the impact of temperament, attachment, self control, initiative and other developmental factors on children's social-emotional developmental functioning within the early childhood setting.
- Provides training and mentoring of caregivers in attending to the developmental social and emotional need of young children as they transition from one activity to another, from one class grouping to another, and from their current educational setting to another.
- Builds relationships of trust and respect with caregivers that create an environment conducive to creativity, change and growth.
- Builds caregiver capacity to solve future problems by applying generalized skills.
- Plans, implements, and monitors collaborative work across disciplines, caregivers, and families.
- Shapes program planning, teaching roles, and strategies that support relationship building as a primary intervention in the consultation process.

# Professional Development

## Rationale

Professional development is an ongoing process designed to continuously enhance an individual's knowledge, skills, and attributes in the field of Early Childhood Mental Health (ECMH). ECMH professionals demonstrate a commitment to obtaining and continually improving the expertise necessary to provide high quality ECMH services and supports to young children, their families and caregivers.

## Competencies

### Foundations and Principles

- Possesses knowledge of licensing regulations and their implication in developing useable interventions – including variations that must interface with other licensure-dependent facilities.
- Possesses knowledge of the communities' childcare initiatives regarding quality and curricula. Can imbed these concepts into comprehensive plans to improve both educational and mental health outcomes.
- Possesses in-depth knowledge and broad-based expertise in ECMH necessary to communicate with diverse cultures, disciplines and other non-mental health entities.
- Possesses knowledge about community resources and can problem-solve alternative support when needed resources are not readily available.
- Possesses basic knowledge of other professions involved with young children and recognition of some of the barriers that may hinder open working relationships.
- Possesses knowledge of basic recording techniques and is able to adapt to various settings and skill levels.
- Recognizes the importance of confidentiality in reporting child observation and assessment results.
- Demonstrates knowledge and skills to address cultural differences, and the ability to discern between stereotypes and truly useful, family-based information.
- Demonstrates problem-solving, negotiation, conflict resolution, and mediation strategies. Can determine courses of action and assistance if typical strategies are not effective.
- Demonstrates knowledge of early childhood professional organizations and accreditations.
- Demonstrates effective communication skills and is aware of and able to adjust when alternative methods must be used (i.e. family members who are deaf, developmentally delayed, etc.).
- Exhibits empathy by conveying understanding of staff and the families' subjective experience and continually monitors signs that indicate how valid that perception may be.
- Utilizes adult learning principles to help caregivers strengthen relationships with children in their care through training, modeling, intervention and showing the ability to adjust approach when differing perspectives, professional demands and other factors cause caregivers to actively reject offered information.
- Designs learning opportunities that reflect principles of child and adult learning that take into consideration specialized issues (i.e. developmental profiles, learning styles, special education issues, cultural differences, etc.)



## Continuous and Reflective Professionalism

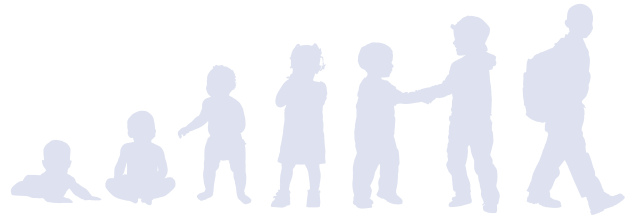
- Exhibits respect by suspending judgment and communicating that staff are valued. Yet is able to recommend supportive, but corrective, action when needed.
- Demonstrates the ability to synthesize research into practice while maintaining the ability to discern and reject new trends that are counter-productive or conflicting with best practice.
- Establishes and practices effective communication and reflection among professionals, colleagues, and families.
- Informs others about research and current knowledge related to the impact of high quality programs for all young children and families. Accepts research and guidance from team members outside the mental health sector (i.e. education, special education, etc.).
- Promotes and informs others of the need to support the emotional, social, physical, and intellectual needs of every child. Can adjust the description of techniques and avenues for this support in relation to the receiving party's expertise, discipline and education.
- Teaches family and staff strategies for promoting children's social-emotional language.
- Analyzes ethical dilemmas and determines appropriate course of action.
- Designs training to help parents learn about child development and deal with the influence of their own child rearing practices without causing embarrassment or feelings of failure.
- Examines own values and biases in working with children, families, and ECE professionals and takes steps to inform and/or correct misconceptions.

## Leadership and Advocacy

- Establishes relationships with other professionals in other early childhood and mental health disciplines.
- Works as a liaison to other health professionals and community organizations as needed. Can use these outside professionals as a liaison to support their own practice when needed.
- Provides mentoring support to colleagues to enhance their understanding of child growth and development.
- Assumes early childhood leadership role in the community, in the state, and in national professional organizations. Advocates for services and legislation for all young children, families, and the early care and education profession.
- Seeks reflective supervision for self in order to maintain perspective, gain support and receive mentoring.
- Maintains professional licensure by seeking continuing education in areas related to ECMH.



# Resources



## Definitions

**Assessment** – The process of gathering an array of information about a child’s strengths and needs from caregivers across environments using various methods of observation for the purpose of making evaluative or diagnostic decisions.

**Attachment** – The process of affection, bonding and connectedness between a child and significant care providers or parents that builds a sense of trust and security within the child and profoundly affects all areas of development.

**Challenging Behavior** – Actions or responses that indicate the child is not exercising self-regulation, is stressed or is afraid and insecure; interfere with children’s learning, development and success at play; are harmful to the child, other children or adults; and/or put a child at risk for later social problems or school failure.

**Child and Family-Centered Consultation** – The primary goal of child and family-centered consultation is to address the factors that contribute to a child’s (and/or family’s) difficulties in functioning well in the early childhood setting. This type of ECMH consultation is typically provided to staff and families and is often initiated by concerns about an individual child’s problematic behavior.

**Community Resources** – Assets and resources available to children and families within a particular community, especially those that can help a family cope with a difficult situation or meet a specific need.

**Confidentiality** – Ensuring that information is accessible only to those authorized to have access. This includes any information, whether oral, written, or computerized, that is directly applicable to an individual requesting or receiving services from an agency and is personally identifiable.

**Core Competencies** – The central range of observable skills that ECMH professionals who work with young children, their families and caregivers need to facilitate children’s social-emotional development.

**Core Knowledge** – The central concepts that ECMH professionals who work with young children, their families and caregivers need to know and understand to facilitate children’s social-emotional development.

**Core Values** – Critical attitudes and beliefs that shape one’s philosophy and guide one’s behavior, especially when dealing with work-related ethical issues.

**Cultural Sensitivity** – The ability to be open to learning about and accepting of different cultural groups.

**Culture** – A body of learned beliefs, traditions, principles, and guides for behavior that are shared among members of a particular group.

**Early Care and Education (ECE)** – Early care and education opportunities in nurturing environments where children can learn what they need to succeed in school and life.

**Early Childhood Mental Health (ECMH)** – The social, emotional, and behavioral well-being of children birth to six and their families, including the developing capacity to: experience, regulate, and express emotion; form close, secure relationships; and explore the environment and learn.

**Early Childhood Mental Health Consultation (ECMHC)** – Includes those culturally sensitive services offered by providers with formal preparation in children’s mental health and experience in working with young children and their families who collaborate with administrators, staff, and family members caring for children birth to 6 in order to promote social, emotional development and transform children’s challenging behavior.

**Early Childhood Therapeutic Interventions** – Direct service or therapeutic interventions include those services delivered personally by a mental health professional to a child, family, or staff member in accordance with clinical or professional practice standards.

**Environment** – All of the physical surroundings and social and cultural conditions that physically and/or emotionally affect children and their ability to learn, grow, develop and survive.

**Family** – A social unit of two or more people who share goals and values, have long-term commitments, and often, but not always, live in the same household. A family may include children and adults living in the home, adults who are responsible for the long-term care and well-being of the child, a child’s legal guardian, and/or parents who may not live in the same household as the child.

**Mentor** – A knowledgeable and experienced individual who provides guidance to beginning and experienced professionals to help them develop skills and reflection of practice. Various mentoring strategies may include observation and feedback, demonstration of skills, conferencing, and provision of resources.

**Programmatic Consultation** – Programmatic consultation focuses on improving the overall quality of the early childhood program or agency and/or on assisting the early childhood program to solve a specific issue that affects more than one child, staff member, and/or family. This type of ECMH consultation is typically provided to program staff and administrators.

**Strength-Based** – The ability to recognize and utilize existing abilities and competencies in children in order to refrain from a negative focus.

**Self-Regulation** – Child’s ability to gain control of bodily functions, manage powerful emotions and maintain focus and attention.

## Tools & Web sites

**The Ages & Stages Questionnaires®: Social-Emotional (ASQ:SE)** was developed to help home visiting, early intervention, Early Head Start, Head Start, child welfare agencies, and other early childhood programs accurately screen infants and young children to determine who would benefit from an in-depth evaluation in the area of social-emotional development. ASQ:SE can also be used in comprehensive Child Find systems to screen large groups of children for the early detection of potential social or emotional problems. [www.agesandstages.com/asq/asqse.html](http://www.agesandstages.com/asq/asqse.html)

**Bright Futures** is a national health promotion and disease prevention initiative that addresses children’s health needs in the context of family and community, Web sites include Bright Futures for Families, Bright Futures at Georgetown University and The Bright Future Education Center. They provide information and materials to be

implemented as Bright Futures principles, guidelines and tools to strengthen the connections between state and local programs, pediatric primary care, families, and local communities. Bright Futures also offers many different resources for use in improving and maintaining the health of all children and adolescents. [www.brightfutures.org](http://www.brightfutures.org)

**The Center for Effective Collaboration and Practice (CECP)** was developed to support and promote a reoriented national preparedness to foster the development and the adjustment of children with, or at risk of, developing serious emotional disturbance. CECP is dedicated to a policy of collaboration at federal, state, and local levels that contributes to and facilitates the production, exchange, and use of knowledge about effective practices. CECP works with other agencies by offering articles, videos, journals, resources and information. CECP also provides Functional Behavioral Assessment tools and materials. [cecp.air.org/center.asp](http://cecp.air.org/center.asp)

**The Center for Mental Health Services (CMHS)** is the Federal agency within the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA) that leads national efforts to improve prevention and mental health treatment services for all Americans. CMHS is the National Mental Health Information Center for SAMHSA. CMHS pursues its mission by helping states improve and increase the quality and range of treatment, rehabilitation, and support services for people with mental health problems, their families, and communities. CMHS programs and activities include Child, Adolescent & Family, Community Support, Consumer/Survivor, HIV/AIDS, Organization and Financing, Protection & Advocacy, Emergency Mental Health and Traumatic Stress, Homelessness, Mental Health Statistics and so on. And SAMHSA is part of the U.S. Department of Health and Human Service. [mentalhealth.samhsa.gov/cmhs/](http://mentalhealth.samhsa.gov/cmhs/)

**The Center for Research for Mothers and Children (CRMC)** is a branch under NICHD – National Institute of Child Health and Human Development. The CRMC serves as a principal source of NIH support for research and research training in maternal and child health. Supported scientists are advancing fundamental and clinical knowledge concerning maternal health and child development problems such as gestational diabetes, antecedents of adult diseases, obesity, specific learning disabilities, mechanisms of cognition and learning, growth retardation, HIV/AIDS, and other congenital infections and diseases. The Center also houses the

primary federal research entity for research on understanding the effects and effectiveness of pharmaceuticals on maternal and child health, as well as a large portfolio on the unique aspects of HIV/AIDS in women and mothers.

[www.nichd.nih.gov/about/crmc/cdb/cdb.htm](http://www.nichd.nih.gov/about/crmc/cdb/cdb.htm)

**The Center on the Social and Emotional Foundations for Early Learning (CSEFEL)** is focused on promoting the social-emotional development and school readiness of young children birth to age 5. CSEFEL is a national resource center funded by the Office of Head Start and Child Care Bureau to disseminate research and evidence-based practices to early childhood programs across the country. [www.vanderbilt.edu/csefel/](http://www.vanderbilt.edu/csefel/)

**The Connect for Kids (CFK)** Web site gives visitors information and tools to learn about issues affecting children, families, and communities and how to take action to improve policies and programs. CFK helps child- and youth-focused organizations effectively reach a broad audience – the public, professional peers, and policymakers – with their content and materials. In 2007, Connect for Kids joined forces with Child Advocacy 360 to continue to provide excellent articles and annotations of “best of the Web” child-focused content. [www.connectforkids.org](http://www.connectforkids.org)

The mission of the **Devereux Early Childhood Initiative (DECI)** is to create working partnerships among early childhood educators, mental health professionals, and families to promote young children’s social and emotional development, foster resilience, and build the skills for school success. The site offers assessments for infant-toddlers, preschool children and a clinical level form as well as various educational tools. Highlighted is the **DECA (Devereux Early Childhood Assessment)** Program in both English and Spanish. Other support materials – including consultation and training packages, scoring forms and worksheets, a series of parent guides and training sessions based on For Now and Forever – are also available. [www.devereux.org/site/PageServer?pagename=deci\\_index](http://www.devereux.org/site/PageServer?pagename=deci_index)

**The Developing Child** works toward strengthening the foundations of emotional health in early childhood. It provides consultation, training and group support. Primary services include local, regional, state, national and international presentations/workshops/conferences/institutes/trainings. Also offered is networking and

planning with private/public early childhood/early intervention providers and publishers.

[www.developingchild.org](http://www.developingchild.org)

**The Georgetown University Center for Child and Human Development (GUCCHD)** was established over four decades ago to improve the quality of life for all children and youth – especially those with, or at risk for, special needs. Located in the nation’s capital, this exceptional center both directly serves vulnerable children and their families, as well as influences local, state, national and international programs and policy. The GUCCHD is a designated University Center for Excellence in Developmental Disabilities for the District of Columbia. It is home to a broad array of projects and programs. [gucchd.georgetown.edu/](http://gucchd.georgetown.edu/) National Technical Assistance Center for Children’s Mental Health [gucchd.georgetown.edu/programs/ta\\_center/index.html](http://gucchd.georgetown.edu/programs/ta_center/index.html)

**The Incredible Years** provides parent, children, and teacher training programs and certified workshops. It works to advance the social and emotional behavior of children of all ethnic groups through a series of interlocking teaching programs supported by more than twenty-five years of clinically proven worldwide research. The Incredible Years delivers teaching programs and materials that develop positive parent-teacher-child relationships and assist in recognizing and treating aggressive behavior before a child becomes an adult. Also available to parents, teachers, and children are training series supporting resources and products. [www.incredibleyears.com](http://www.incredibleyears.com)

**Mental Health America** (formerly known as the National Mental Health Association) is the country’s leading nonprofit dedicated to helping all people live mentally healthier lives. With more than 320 affiliates nationwide, MHA addresses the full spectrum of mental and substance use conditions and effects, works to inform, advocate and enable access to quality behavioral health services for all Americans. Factsheet: What Every Child Needs for Good Mental Health [www.nmha.org/infoctr/factsheets/72.cfm](http://www.nmha.org/infoctr/factsheets/72.cfm)

**The National Center for Children in Poverty (NCCP)** is the nation’s leading public policy center dedicated to promoting the economic security, health, and well-being of America’s low-income families and children. NCCP uses research to inform policy and practice with the goal of ensuring positive outcomes for the next generation. NCCP works to uncover facts, identify trends, and analyze policy developments to promote family-oriented

solutions at the state and national levels. NCCP also provides trusted resources for policymakers, practitioners, advocacies, and the media. [cpmcnet.columbia.edu/dept/nccp/index.html](http://cpmcnet.columbia.edu/dept/nccp/index.html)

**National Child Traumatic Stress Network (NCTSN)**  
Established by Congress in 2000, the National Child Traumatic Stress Network is a unique collaboration of academic and community-based service centers with a mission of raising the standard of care and increasing access to services for traumatized children and their families. Combining knowledge of child development, expertise in the full range of child traumatic experiences, and attention to cultural perspectives, the NCTSN serves as a national resource for developing and disseminating evidence-based interventions, trauma-informed services, and public and professional education. [www.nctsn.org](http://www.nctsn.org)

**National Institute of Child Health and Human Development (NICHD) Information Resource Center** provides information on health issues within the NICHD research domain to the public. The NICHD, established by Congress in 1962, conducts and supports research on topics related to the health of children, adults, families, and populations. Some of these topics include: reducing infant deaths; improving the health of women, men, and families; understanding reproductive health and fertility/infertility; learning about growth and development; examining, preventing and treating problems of birth defects, mental retardation, and developmental disabilities; and enhancing well-being through people's lifespans with optimal rehabilitation research. [www.nichd.nih.gov](http://www.nichd.nih.gov)

**National Institute of Mental Health (NIMH)** works to transform the understanding and treatment of mental illnesses through basic and clinical research, paving the way for prevention, recovery and cure. NIMH generates research and promotes research training to fulfill the following four objectives: 1) promote discovery in the brain and behavioral sciences to fuel research on the causes of mental disorders 2) chart mental illness trajectories to determine when, where, and how to intervene 3) develop new and better interventions that incorporate the diverse needs and circumstances of people with mental illnesses 4) strengthen the public health impact of NIMH-supported research [www.nimh.nih.gov/](http://www.nimh.nih.gov/)

**From Neurons to Neighborhoods: The Science of Early Childhood Development** (2000) Authors: Jack P. Shonkoff and Deborah A. Phillips, Editors; Committee on Integrating the Science of Early

Childhood Development, Board on Children, Youth, and Families. *Neurons to Neighborhoods Executive Summary: Scientists have had a long-standing fascination with the complexities of the process of human development. Parents have always been captivated by the rapid growth and development that characterize the earliest years of their children's lives. Professional service providers continue to search for new knowledge to inform their work. Consequently, one of the distinctive features of the science of early childhood development is the extent to which it evolves under the anxious and eager eyes of millions of families, policymakers, and service providers who seek authoritative guidance as they address the challenges of promoting the health and well-being of young children.* [www.nap.edu/books/0309069882/html/index.html](http://www.nap.edu/books/0309069882/html/index.html)

**Ohio Department of Mental Health (ODMH)** works to assure access to quality mental health services for Ohioans at all levels of need, and to provide mental health services during lives for problems ranging from situational stress to severe and chronic mental illness. ODMH is guided by the Mental Health Act of 1988. ODMH engages in a variety of activities aimed at establishing mental health as a cornerstone of health in Ohio and ensuring that quality mental health care is available to all Ohioans at all stages of life. ODMH offers treatment in state hospitals to people with mental illness, including those who are involved with the criminal justice system. The Department also protects and monitors the rights of people receiving mental health services and provides training, technical assistance and resource linkages focused on prevention, promotion, planning and implementing. [www.mh.state.oh.us/what-we-do/provide/children-youth-and-families/early-childhood/index.shtml](http://www.mh.state.oh.us/what-we-do/provide/children-youth-and-families/early-childhood/index.shtml)

**ODMH-ECMH (Early Childhood Mental Health)**  
This site has been established for the dissemination of information regarding the Ohio Department of Mental Health's Early Childhood Mental Health Initiative. It is also for sharing information, ideas, etc. with individuals interested in ECMH. ODMH-ECMH [subscribe@yahoogroups.com](mailto:subscribe@yahoogroups.com).

**Parents' Action for Children** focuses on raising public awareness about the critical importance the prenatal period through the first early years plays in a child's healthy brain development. The organization provides help in educating foster parents about the mental health resources available for the children in their care. Films, DVD, videos, manuals, booklets, and products are available both in English and Spanish

for education and further support, using the critically-acclaimed “*I Am Your Child*” series and continues with “*For the Child*.” [iamyourchild.org](http://iamyourchild.org)

**The Portage Project** is committed to creating and enhancing quality programs which promote the development and education of all children and families. The Project operates programs that offer direct services to children and families. This is done by providing training and technical assistance to programs serving young children and their families and by developing and distributing materials to support quality early childhood programs. The Portage Project was originally created in response to the need to provide services in a rural community to young children with disabilities. [portageproject.org](http://portageproject.org)

**Portland Research and Training Center (RTC) on Family Support and Children’s Mental Health** is dedicated to promoting effective community-based, culturally competent, family-centered services for families and their children who are, or may be affected by mental, emotional or behavioral disorders. The Center collaborates with thirteen other organizations to promote improved services and outcomes for children and youth with emotional and behavioral disorders and their families. Together, the partner organizations provide research services, support, and technical assistance to communities across the United States that have received grants under the Center for Mental Health Services’ Comprehensive Community Mental Health Services for Children and Their Families. [www.rtc.pdx.edu](http://www.rtc.pdx.edu) The Glossary of Children’s Mental Health Terms introduces terms and definitions relevant to children’s mental health in alphabetic order. [www.rtc.pdx.edu/pgGlossaryOfChildrensMH.shtml](http://www.rtc.pdx.edu/pgGlossaryOfChildrensMH.shtml)

**Search Institute** is an independent, nonprofit, nonsectarian organization committed to helping create healthy communities for every young person. Because it believes that “all kids are our kids,” it creates books and other materials that welcome and respect people of all races, ethnicity, cultures, genders, religions, economic backgrounds, sexual orientations, and abilities. Mission: To provide leadership, knowledge, and resources to promote healthy children, youth, and communities. [www.search-institute.org](http://www.search-institute.org)

**Technical Assistance Center on Social-Emotional Intervention for Young Children (TACSEI)** was previously known as the Center for Evidence Based Practice: Young Children with Challenging

Behavior. This organization has compiled and synthesized extensive research on effective practices into actual, everyday practice guidelines and information. Decision makers, caregivers and service providers can access this material in order to develop an enhanced awareness of, better understanding of, and increased capacity to use evidence based practices to improve the social-emotional outcomes for young children with, or at risk for, delays or disabilities. TACSEI operates under a five-year grant made possible by the U.S. Department of Education, Office of Special Education Programs. [www.challengingbehavior.org/](http://www.challengingbehavior.org/)

**Tufts University Child and Family Web Guide** describes trustworthy Web sites on topics of interest to parents and professionals. All the sites listed on the Web Guide have been systematically evaluated by graduate students and faculty in child development. These sites have been selected from thousands that are available on the Web, based primarily on the quality of the information they provide. Web Guide give the public easy access to the best child development information on the Web. There are five main categories of information provided by Web Guide, including family/parenting, education/learning, typical child development, health/mental health, and resources/recreation. [www.cfw.tufts.edu](http://www.cfw.tufts.edu)

**Voices for America’s Children** is a nonpartisan, national organization committed to speaking out for the well-being of children at the federal, state and local levels of government. It is a nonprofit organization that coordinates a nationwide network of state and local child advocacy organizations in the United States. Since 1984, Voices has supported child advocates nationwide who have achieved public policy victories for children in early education, health, juvenile justice, child welfare, tax and budget decisions and other areas. It pursues its mission and vision by: supporting member organizations advocating for children on local, state, and federal public policy issues; advocating for children on national and federal public policy issues; and by leading national campaigns to improve public policies affecting children. [www.childadvocacy.org](http://www.childadvocacy.org)

**Zero To Three** is a national nonprofit, multidisciplinary organization that informs, trains and supports professionals, policymakers and parents in their efforts to improve the lives of infants and toddlers. [www.zerotothree.org](http://www.zerotothree.org)

# Sensory Processing References

## Auditory

NIDCD's fact sheet on auditory processing disorder (APD) [www.nidcd.nih.gov/health/voice/auditory.asp](http://www.nidcd.nih.gov/health/voice/auditory.asp).  
[www.aboutourkids.org/](http://www.aboutourkids.org/) (general information).  
[www.audiologycentre.com/child\\_faq\\_management.htm](http://www.audiologycentre.com/child_faq_management.htm) (FAQ information).

## Sensory

SPD Foundation ([www.spdfoundation.net](http://www.spdfoundation.net)) – A nonprofit charity dedicated to conducting SPD research, education, and advocacy. The Foundation's Web site provides extensive online information including an indexed Library function with several dozen clinical/research articles and abstracts, SPD Red Flags, and others.  
*Ohio's Early Childhood Core Knowledge & Competencies* (2007) Ohio Professional Development Network.

## Vision

[www.covd.org](http://www.covd.org), [www.optometrists.org](http://www.optometrists.org), [www.oepf.org](http://www.oepf.org)  
[www.visiontherapy.org/](http://www.visiontherapy.org/) (vision therapy basics)

## Source Documents

*California's Infant, Preschool and Family Mental Health Initiative; Training Guidelines and Recommended Personnel Competencies* (2003)

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*Challenging Behavior in Young Children: Understanding, Preventing and Responding Effectively* (2003) Kaiser and Rasminsky: Pearson Education, Inc.

*Competency Developmental Achievement Levels of the National Council of Schools and Programs in Professional Psychology* (2007)

*The Competent Early Childhood Mental Health Specialist* (2008) Korfmacher and Hilado: Erikson Institute

*Early Childhood Mental Health Consultation – An Evaluation Tool Kit* (2007) Georgetown University

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*Early Childhood Mental Health Services: A Policy and Systems Development Perspective* (2000) Jane Knitzer, National Center for Children in Poverty, Columbia School of Public Health, 1998

*Handbook of Infant Mental Health: Second Edition* (2000) Zeanah: The Guilford Press

*Help Me Grow Service Coordinator Credential: Clinical Supervisor Guide* (2004) Help Me Grow

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*Michigan Association for Infant Mental Health Endorsement* [www.mi-amh.msu.edu/aboutus/endorsement](http://www.mi-amh.msu.edu/aboutus/endorsement)

*Touchpoints: Birth to Three* (2006) Brazelton and Sparrow: Da Capo Press

*Touchpoints: Three to Six* (2002) Brazelton and Sparrow: Da Capo Press

*Vermont's Early Childhood and Family Mental Health Competencies* (June 2007)



Ohio Child Care  
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Association

**Ohio**

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