

What is an Infant Mental Health Specialist?

“It may be most helpful to define the Infant Mental Health Specialist *not as a member of a particular discipline*, but rather as someone with a distinct set of core beliefs, skills, training experiences, and clinical strategies who incorporates a comprehensive, intensive and relationship-based approach to working with young children and families.”¹ Providers listed in this directory utilize the following clinical strategies^{1,2} in their work with young children and their families:

1. Building relationships and using them as instruments of change.
2. Meeting with the infant and parent together throughout the period of intervention.
3. Sharing in the observation of the infant’s growth and development.
4. Offering anticipatory guidance to the parent that is specific to the infant.
5. Alerting the parent to the infant’s individual accomplishments and needs.
6. Helping the parent to find pleasure in the relationship with the infant.
7. Creating opportunities for interaction and exchange between parent(s) and infant or parent(s) and practitioner.
8. Allowing the parent to take the lead in interacting with the infant or determining the “agenda” or “topic for discussion.”
9. Identifying and enhancing the capacities that each parent brings to the care of the infant.
10. Wondering about the parent’s thoughts and feelings related to the presence and care of the infant and the changing responsibilities of parenthood.
11. Wondering about the infant’s experiences and feelings [during interactions with caregivers].
12. Listening for the past as it is expressed in the present; inquiring and talking.
13. Allowing core relational conflicts and emotions to be expressed by the parent; holding, containing and talking about them as the parent is able.
14. Attending and responding to parental histories of abandonment, separation and unresolved loss as they affect the care of the infant, the infant’s development, the parent’s emotional health and the early developing relationship.
15. Attending and responding to the infant’s history of early care within the developing parent-infant relationship.
16. Identifying, treating and/or collaborating with others if needed in the treatment of disorders of infancy, delays and disabilities, parental mental illness and family dysfunction.
17. Remaining open, curious and reflective.

¹ Weatherston DJ. Qualities of the infant mental health specialist. Zero to Three, October/November 2000, Vol 21(2) 3-10.

² Items #10-16 are specific to the Infant Mental Health Specialist