

Cover Sheet for Certificate in Infant Mental Health Proposal

Institution: University of Washington

Degree Granting Unit: Nursing, Department of Family and Child Nursing

Degree: Certificate in Infant Mental Health

Mode of Delivery: single campus

Proposed Starting date: January 2002

Academic Representative: Dr. Kathryn Barnard, Professor  
Box 357020, 543-9200; Fax 543-9266  
[Kathyb@u.washington.edu](mailto:Kathyb@u.washington.edu)

Endorsement by: Nancy Woods, Ph.D., Dean \_\_\_\_\_  
Chief Academic Officer  
Date: \_\_\_\_\_

I.

II.  
III.  
IV.

## V. Program Need

### A. Relationship to Institutional Role and Mission

On October 20, 2000 President McCormick at a meeting of the Board of Regents stated that “higher education has entered an era of remarkable change and the UW is at the leading edge.” Learning through research is declared as our central mission. Education he predicts will undergo a dramatic change as new forces and competitors emerge. The goals that President McCormick laid out for the future are 1) making progress in transforming the educational experience at the University of Washington 2) increasing the diversity of the student body and making the campus climate receptive for minority students, faculty and staff and 3) obtaining resources for the University through major fund raising.

The proposed Certificate Program in Infant Mental Health is strongly related to the objectives set forth for the University and to the Department of Family and Child Nursing. The Department’s goals are specifically to integrate the preservation, development, application and dissemination of knowledge about the health of families and to establish and nurture collaborations and linkages within the department, school, within the University and with the community. The educational program is a partnership between academic units. (Nursing is the sponsoring academic unit; the Center for Human Development and Disability is the housing unit and faculty from the Schools of Social Work, Public Health, and the College of Education and the Department of Psychology) are all members of the Advisory Board. In addition we are partnering with several community institutions as members of the Advisory Board and recommending prerequisite academic/clinical experiences the Center on Object Relations and the Psychoanalytic society provide. The Certificate Program provides a new area of study in Infant Mental Health that has not been in the curriculum of any Universities until recently as we have discovered the role of early experiences and brain development. This Certificate is possible to offer through the generous contributions of major donors.

### B. Documentation of Need for Program.

Current research tells us that the first years of life are of critical importance developmentally. In just a few short years the helpless newborn evolves into a child who can run and jump, converse freely, solve problems and form enduring bonds with loved ones. No other developmental period can match the explosive growth in physical, cognitive, and language skills seen during the first 3 years. We now know that healthy *emotional* development provides the “scaffolding” for all these achievements: without a secure attachment to a loving caregiver, the child’s ability to explore and make use of his or her surroundings is compromised. A recent document released by the National Academy of Sciences, (2000) From Neurons to Neighborhoods made strong recommendations about the need to increase mental health services to infants and toddlers in relation to the accumulating evidence about the impact of early experiences and the development of the mental and emotional processing areas of the brain. Currently in the State of Washington it is very difficult to access Infant Mental Health Services because there has been little professional training available in our professional schools.

Mental health disturbances in infancy manifest themselves in a variety of ways. Troubled infants may be especially clingy with caregivers, becoming terribly anxious whenever separated. They may show other behavior problems

like difficulties sleeping or eating, or unusually high level of aggression directed at self or others. Or they may appear withdrawn, even sad. These behaviors can be frustrating and frightening to those who care for them.

What causes these problems? The child may have difficulties with self-regulation, becoming easily over-stimulated by touch or sight, for instance. Or they may have other subtle neurological impairments that make communication with their loved ones difficult. Often, the relationship between infant and parent has become strained by any number of outside forces: poverty, loss of a loved one, substance abuse, and parental depression are just some of the more dramatic examples.

Because infants are so completely dependent on their caregivers for physical and emotional sustenance, *the quality of the infant-caregiver relationship is of supreme importance*. Studies have shown that children who have insecure attachments to their caregivers as infants are more likely to have difficulties forming friendships, succeeding in school and staying out of trouble later in childhood. They are also less likely to form stable, loving relationships with mates as adults. A increasing number of international adoptions in the Pacific Northwest have also brought the establishment of parent-child relationships to the attention of scholars and clinicians.

Interventions that start early, and anticipate future problems and redirect problematic circumstances of the caregiving environment are both more likely to succeed, and more cost effective in the long-term if they prevent future school failure, incarcerations, Children's Protective Service and foster care referrals and, ultimately, the transference of impaired infant-parent relationships to the next generation.

### **How do Infant Mental Health Specialists help?**

Because young children cannot generally tell us what is troubling them, adults who work with them must be extremely sensitive to each child's developmental progress, his or her "temperament" or genetic endowment, the challenges faced by the family, and the larger social and cultural environment of the child. Infant mental health specialists are trained to focus on both the unique qualities of individual children and the larger context that surrounds them.

Help for these vulnerable children comes in the form of an in-depth clinical assessment followed by specialized counseling. Rather than focusing exclusively on the symptoms of either infant or parent, the infant mental health specialist nurtures and supports the developing relationship, helping the parent become more "present" for the baby and, ultimately, increasing their enjoyment of each other. *Research has shown that infant-parent psychotherapy can improve the child's attachment to caregiver as well as increase the parent's empathy and confidence while decreasing feelings of depression and isolation.* (Lieberman, Weston & Pawl, 1991, Muir, Lojaksek & Cohen, 1992)

Infant mental health specialists can also help parents understand and manage problems in the child's ability to self-regulate, and can provide referrals to language, occupational and physical therapists for more specialized support.

Prevention of early childhood difficulties and disruptions in the parent-child relationship is, of course, of primary importance. Graduates will be trained to work in community settings with new and expecting parents to help them prepare for the challenges of this critical period in the development of their family.

Graduates of the certificate program will also offer consultation services to other professionals, including childcare workers, pediatricians, social workers and others. These professionals work closely with young children struggling with emotional and behavioral problems and are often the first to be asked for advice from confused parents. By calling in the services of a consultant, they can increase their own effectiveness while decreasing the stress caused by working with these often fragile families.

### C. Relationship to other Institutions

#### 1. Duplication

Currently similar programs only exist outside the state of Washington at the University of California, San Francisco; Erickson Institute, Chicago; Louisiana State University and Tulane University, New Orleans; Yale University, New Haven; New York University, New York; University of Colorado, Denver. and Cedars Hospital in Los Angeles.

No academic based programs exist in the state of Washington. Social Work has a continuing education certificate program in Child Mental Health, however it has no clinical training.

#### 2. Uniqueness of Program

Infant mental health is now a field of study in its own right, as evidenced by the on-going work of institutions like Zero to Three: the National Center for Infants, Toddlers and Families, and the World Association of Infant Mental Health, which recently celebrated its 20-year anniversary. Periodicals such as the *Infant Mental Health Journal* and other publications have arrived on the scene more recently to support and chronicle the efforts of both clinical and research professionals working in the field.

The *Handbook of Infant Mental Health* (1993, 2000), described by its editor, Charles Zeanah, as a comprehensive text for the field (preface). Reports in a chapter by Emde, Bingham and Harmon (1993).the unique qualities of the field of infant mental health derive from four characteristics: its **multidisciplinary** nature, its focus on **development**, emphasis on **prevention**, and the **multigenerational nature** of issues arising in infancy. While traditional training programs that overlap infant mental health--such as clinical or developmental psychology, pediatrics and nursing--emphasize one or two of these areas, only infant mental

health places a premium on all four. Clearly, this has implications for training in the field. The proposed certificate program meets all four qualities.

## **VI. Program Description**

### **A. Goal**

The Certificate Program in Infant Mental Health will train specialists to support the healthy emotional and mental development of infants and their families through direct service and through consultation to professionals in related fields.

### **Objectives**

1. Provide multidisciplinary learning experiences about major theories related to the emotional development of infants within the context of their family or appointed caregivers..
2. Prepare the candidate with the skills of diagnosis and the relational treatment of mental health problems found in infants and toddlers including disorders of relationships and self regulation,
3. Expose the candidate to a variety of strategies and service delivery models for infant mental health promotion and mental health disorder prevention.
4. Develop an awareness of intergenerational transmission of emotional well being through relationships and parenting practices.
5. Explore the basis of brain, behavior and learning as they relate to emotional health and social function.

### **Student Learning Outcomes**

1. Develop a knowledge base about infant mental health including the historical development, major theories of development, attachment relationships, brain maturation, social emotional competence of children and existing types of disturbances in children under five years of age.
2. Develop skills in the diagnosis and treatment of infants and their caregivers.
3. Develop program development skills for integrating infant mental health into existing service delivery programs.
4. Develop a learning community for life long development as a Infant Mental Health Specialist.
5. Develop competencies to qualify for recognition or certification from professional organizations who have defined the criteria for specialization in Infant Mental Health.
- 6.

### **B. Curriculum**

#### **1. Course of Study**

Coursework consists of new courses developed specifically for the certificate. Total required credits is 29. An sample curriculum is in Table 1

#### **Course courses to be developed:**

1. **Seminar in Infant Mental Health Issues (Total 3 credits Pass/Fail)**
2. **Infant/Toddler/Preschool Child Psychopathology and Assessment (Total 4 credits- Graded)**
3. **Observation & Assessment of Relationships (Total 4 credits - Graded)**
4. **Relationship Development and Intervention (Clinical course- total 15 credits – Pass/Fail)**

**5. Seminar in Infant Mental Health Intervention, Consultation and Leadership (Capstone course Total 3 credits, graded)**

Course Sybille are included in the Appendix to this proposal.

**6. Admission requirements**

Candidates for the certificate will be either matriculated in a masters or doctoral program in nursing, social work, special education, or public health or be professionals in mental health-related fields, including counseling, nursing, and social work and education.. Candidates matriculated into other graduate programs must apply separately through the School of Nursing and be approved for the Certificate Program. Professional students must apply to the School of Nursing or Graduate School as a non-matriculated student. The two-year (part-time) program includes extensive coursework in infant development, child psychopathology, and assessment along with intensive supervision of clinical cases. Candidates with previous clinical experience in family counseling or mental health services will be given priority.

Courses required for the Certificate are separate from masters' program requirements. The program will admit 10 students per academic year. Except for year one, all students will enter fall quarter. During 2002 alone applications will be considered beginning in winter quarter since this will be soonest program resources will be in place and again in fall quarter 2002.

Candidates are given priority if they have completed Infant Observation before entering the program. Infant Observation offers students the opportunity to observe a typically developing infant within the home environment on a weekly basis for one year. Infant Observation students also attend weekly supervision sessions to discuss what is seen in the emerging parent-child relationship, and to identify possible obstacles to healthy emotional development. Infant Observation is offered through a partnership with the Seattle Psychoanalytic Society and Institute (SPSI) and the Center for Object Relations (COR), both respected private post-graduate training institutes in the Seattle area. This requirement is related to admission and if not completed would need to be completed within the first year of the program in addition to required course work. There are no plans to offer this Infant Observation course through the University at this time since it would duplicate training available at another local facility.

Candidates who enter the program without prior clinical experience will be required to complete courses in pre-practicum counseling and family counseling through the School of Nursing or Educational Psychology department in the College of Education or in the School of Social Work.

**7. Course sharing**

Relevant Electives for matriculated graduate or professional students depending on background and interests.

SOCW 531 Child and Family Policy Services (3 credits)

SOCW 546 Multi-Ethnic Practice Methods (3 credits)

SOCW 553 Supervisory Leadership (3 credits)  
NURS 558 Infancy in the Context of Relationships (4 credits)  
NURS 544 Psychosocial Adaptations of Individuals and Families during the Perinatal Period (3 credits)  
NURS 571 Advanced Interpersonal Therapeutics with Families (3 credits)  
PSYC 402 Infant Behavior and Development (3 credits)  
PSYC 526 Psychological Assessment of Children (5 credits)  
HSERV 543 Topics in Maternal and Child Health (3 credits)  
EDPSY 502 Developmental Foundations of Early learning (3 credits)  
EDPSY 519 Communication and Language in Young Exceptional Children (3 credits)  
EDPSY 471 Neuropsychology of School and Behavior Problems (5 credits)  
EDPSY 550 Family Counseling (3 credits)  
EDSPE 419 Intervention for Families of Children with Disabilities (3 credits)

All new courses, except for the clinical course on Relationship and Development Intervention can be taken by non-certificate students. The limiting factor on the clinical course is faculty supervision availability.

### **C. Use of Technology**

Selected sessions of the Issues in Infant Mental Health will be transmitted via the video conference system in the State of Washington during the academic year September – June. There will be approximately 9 sessions transmitted during the year. This will provide continuing education for professionals in the community and will be a means of reaching a board state audience of professionals interested in Infant Mental Health. This is also a great means to reach many ethnic groups. Relevant Webb pages will be used to provide the Seminar availability and schedule. The seminars will involve dissemination of the state of the art and science in Infant Mental Health. The seminar content will be geared to the level of direct practice and will include faculty, students and visiting scholars and clinicians in the presentations. The School of Nursing has a state of the art Video Conference facility that links up with the University link with K-12 and Community Colleges.

### **D. Faculty**

In addition to the 2.10 FTE Faculty named there will be an Advisory Board which is composed of faculty from Nursing, Pediatrics, Psychiatry, Social Work, Psychology and Education and several community professionals. This Board will oversee the program admission and implementation of the courses and be charged with evaluating the quality of the student's experience and outcome.

The faculty who have agreed to be on the Advisory Board include: (IN PROCESS OF ASKING)

Michael Guralnick, Professor Pediatrics and Psychology and the Center for Human Development and Disability. In addition to his administrative role with the Center where Center for Infant Mental Health and the Newborn to Five clinic

where be established has a strong track record of scholarship in social development in children with disabilities.

Kristen Swanson, Nursing, is Chair of the Family and Child Nursing Department. Her area of expertise is the subject of caring which has definite links with psychotherapeutic processes.

Jim Whittaker, Professor Social of Social Work; is the lead faculty in Social Work programs dealing with children. He has considerable experience in working with service programs in the community including institutional and foster care of children.

Andrew Meltzoff, Professor Department of Psychology, is Co-director of the Center for Mind, Behavior and Learning. His area of expertise is learning and in particular the role of imitation as a major strategy for cognitive development.

Colleen Huebner, Assistant Professor, School of Public Health; Dr. Huebner did her doctoral work in Developmental Psychology. Her special area of expertise is language development. She has been involved in many randomized control trials of early intervention. She currently is testing a infant psychotherapeutic intervention called Secure Beginnings. This program and its evaluation are funded through grants from the State of Washington and it is in partnership with the Center on Object Relations.

Diane Magyary, Professor Nursing, is an accomplished scholar in Pediatric Primary Care and specializes in the assessment and treatment of children with learning disorders. Her practice is at Odessa Brown Children's Clinic.

Jean Kelly, Associate Professor in Nursing is a specialist in Early Child Intervention and Relationship Therapy. She is on the State Special Education Training Committee

Pat Rodriguez, Assistant Professor Education;

Susan Sandall, Assistant Professor Education; Diane

Austin Case, Clinical Professor in Psychiatry and Behavioral Sciences is the Director of the Center for Object Relations.

Yaffa Maritz, Social Worker and Founder and Director of the Listening Mothers Program.

Lisa Mennet is a child psychotherapist with a practice at the Ryther Center. Jean Kelly, Associate Professor in Nursing is a specialist in Early Child Intervention and Relationship Therapy.

The curriculum vitas for Professors Barnard and Spieker and Assistant Professor Solchany are attached. Professor Spieker and Assistant Professor Solchany's appointment begin Fall Quarter, 2001. We are in the process of recruiting for the

Director of the Program and the Clinical Coordinator. The recruiting criteria are also attached.

Dr. Barnard as a nurse, has a long career in early intervention. She received one of the early Individual Ph.D.'s from the University of Washington in the Ecology of Early Childhood. She has been involved in numerous national organizations devoted to training and delivery of preventive intervention in Infant and Toddler development. Her emphasis in the past decade has been on Infant Mental Health. She has been the Principle Investigator of four major randomized trials of early preventive intervention. It is in this research she has developed her passion and knowledge about infant mental health as a field.

Dr. Spieker has her academic preparation in Developmental Psychology. For 15 years she has supervised a team of research assistants in the classification of attachment behaviors in infants and young children. She has been an investigator in two early prevention trials and their effects on parent-child attachment. She has studied relations between attachment classification and developmental outcomes in several high-risk groups. She has studied the effects of non-maternal child care on mother-child attachment security in infancy and the preschool years. In September 2001 she will start a regular faculty appointment in the Department of Family and Child Nursing as a full professor. Prior to this appointment she has had full time research faculty appointments, most recently as Research Professor.

Dr. Joanne Solchany has a background in psychology and psychiatric nursing. She completed her doctoral work in Nursing Science and her area of expertise is mothering, attachment in infant mental health. She was recently named a Solint Leadership Fellow of the Zero-to-Three: National Center for Clinical Infant Programs. She is a licensed Clinical Specialist in Infant, Child and Adolescent Psychiatric Nursing.

### Description of Recruitment Positions

Hiring criteria for the Program Director:

- Individual with doctoral training in Nursing, Social Work, Psychology, Psychiatry, Developmental Psychology or related area and pH completed.
- Trained as a Parent-Infant Psychotherapist with credentials for practice.
- Five or more years in clinical work with parent-child therapy.
- Research experience as an investigator. Published work in area of infancy, parenting, psychotherapy, attachment theory, and diagnosis.
- Experience in supervising parent-infant psychotherapy trainees.
- Program administration and/or grant administration experience preferred.

The program will also hire a half-time Clinical Director. This person will coordinate the efforts of outside supervisors, provide direct supervision to students and assist the Program Director with research efforts.

Hiring criteria for the Clinical Director includes:

- Training at the masters or doctoral level in parent-infant psychotherapy.
- Five or more years as Parent-Infant Psychotherapist.
- License to practice as a Parent-Infant Psychotherapist or equivalent.
- Two or more years supervising psychotherapists in parent-infant psychotherapy.
- Experience in providing training in academic or clinical agencies.
- Working knowledge of the Infancy and Mental Health-related programs in the greater Seattle area.
- Familiarity with current research in Infant Mental Health

**TABLE 1: Program Faculty**

Name	Rank	Status	% Effort in Program
Kathryn E. Barnard	Professor	Regular	10%
Susan Spieker	Professor	Regular (9/15/01)	25%
Joanne Solchany	Assistant Professor	Regular (9/15/01)	30%
Director (TBA)	Assistant Professor	Regular (9/15/01)	100%
Clinical Coordinator	Senior Lecturer	Regular (9/15/01)	50%
<b>Total FTE Faculty:</b>			

**E. Students Table 2**

A survey of professionals working in early intervention and child mental health as done in February, 2001. Fifty-six surveys were returned. Thirty-nine individuals indicated interest in enrolling in the Certificate in Infant Mental Health Certificate Program. The majority said they could devote 10 hour more hours weekly to study. Over half indicated they would need support for tuition expenses. We have not surveyed the present graduate students in nursing, social work, education, or public health, but we estimate there would be at least 15 possible candidates a year. None of the existing schools or departments on the campus have existing infant mental health programs in their respective academic programs.

1. Projected enrollment for five years

Year 1	Year 2	Year 3	Year 4	Year 5
10	20	20	20	10

**TABLE 2: Size of Program**

Number of Students	Year 1	Year 2	Year 3
Headcount	10	20 Full enrollment	20
<b>FTE:</b>			

- Please indicate the year in which the program plans to reach full enrollment.

**F. Finances of the program****TABLE 3: Administrative/Support Staff**

Name	Title	Responsibilities	% Effort in Program
Administrative Staff			
Support Staff			
<b>Total FTE Staff:</b>			

**TABLE 4: Summary of Program Costs - Year 1 and Year N**

Line Item	Internal Reallocation	New State Funds	Other Sources (a)	Year 1 Total	Year N(b) Total
Administrative salaries (#FTE) Benefits @ # %					
Faculty salaries (#FTE) Benefits @ # %					
TA/RA salaries (#FTE) Benefits @ # %					
Clerical salaries (#FTE) Benefits @ # %					
Other salaries © (#FTE) Benefits @ # %					
Contract services					
Goods & services					
Travel					
Equipment (d)					
Other (e) (Itemize)					
Indirect (If applied to program)					
<b>TOTAL COST</b>					

FTE students					
Cost-per-FTE student					

- (a) Indicate the source of funds.
- (b) Indicate academic year when the program is expected to reach full enrollment.
- (c) Describe position or duties.
- (d) Detail type and number of equipment needed.
- (e) Describe what is included in this category.



University of Washington  
School of Nursing  
*Infant Mental Health Certificate a sample course plan*

Year 1

Autumn Quarter	Cr	Winter Quarter	Cr	Spring Quarter	Cr	Summer Quarter	Cr
		*Nurs XXX Observation and Assessments of Relationships	2	Nurs XXX Observation and Assessments of Relationships	2	*	
*NURS XXX Issues in Infant Mental Health	1	*NURS XXX Issues in Infant Mental Health	1	*NURS XXX Issues in Infant Mental Health	1		
*NursXXX Infant/Toddler/Preschool Child Psychopathology and Assessment	2	*Nurs XXX Infant/Toddler/Preschool Child Psychopathology and Assessment	2	*NURS Clin XXX Relationship Development and Intervention	3	NURS Clin XXX Relationship Development and Intervention	3
Total	3		5		6		3
Year Two							
	Cr	Winter Quarter	Cr	Spring Quarter	Cr	Summer Quarter	Cr
NURS XXX Seminar in Intervention, Consultation and Leadership	1	* Nurs XXX Infant Mental Health Intervention Strategies	1	Nurs XXX Infant Mental Health Intervention Strategies	1		
*NURS CLIN XXX Relationship Development and Intervention	3	*NURS XXX Relationship Development and Intervention	3	*NURS XXX Relationship Development and Intervention	3		
Total	4		4		4		

\*Core Required 29 credits

