



infant massage usa®



Alliance for the Advancement of  
Infant Mental Health

# Infant Massage Education Trainings and Competency Guidelines for Culturally Sensitive, Relationship-Focused Practice Promoting Infant and Early Childhood Mental Health®

## Introduction

The crosswalk between Infant Massage USA Certification Training and the Competency Guidelines for Endorsement for Culturally Sensitive, Relationship-Focused Practice Promoting Infant and Early Childhood Mental Health (MI-AIMH Copyright © 2017) is a tool designed to support professionals working with infants and their families.

Infant Massage USA (IMUSA) and the Alliance for the Advancement of Infant Mental Health (Alliance) agree to promote their mutual commitment to workforce development across the infant-early childhood and family field through competency-informed training and reflective practice experiences. The co-branded crosswalk across the Infant Massage USA Certification Training and the Competency Guidelines emphasizes this commitment.

Students attending the Infant Massage USA Certification Training come from various backgrounds, including social work, psychology, child development, early childhood education, early intervention, occupational therapy, physical therapy, massage therapy, and other fields working with very young children and their families. The 4-day, 28-hour training is available both online and face-to-face. The practicum needed for certification is recognized for an additional 28 hours and entails the completion of a take-home assignment which integrates in-class learning through multiple choice, short answer, multiple answer questions, and the required reading of *Infant Massage: A Handbook for Loving Parents* by Vimala McClure and another current book highlighting infant development that each participant chooses. Additionally, students teach five caregivers the five-session class.



The program prepares practitioners to address the social-emotional, relational, and mental health needs of infants and their caregivers by applying an infant and early childhood mental health-informed lens to practice in various settings and across disciplines. In-class training time consists of multiple opportunities to discuss the developing infant and their relationship with their parents, with a strong focus on attachment, responsive caregiving, understanding of cues of engagement and disengagement, factors that promote the parent-infant relationship, and factors that can get in the way of the relationship, with suggestions for ways to support parents and their infants.

The Infant Massage USA Certification Training was reviewed to address competencies that professionals applying for or renewing Infant/Early Childhood Mental Health Endorsement (IMH-E ® or ECMH-E ®) would include in their training record. Please see the Notes column of the crosswalk for information about whether the identified knowledge/skill areas were met or partially met and for which Endorsement categories.

Individuals can earn Endorsement in the category that is the best fit for one's scope of practice:

#### Promotion:

- Infant Family Associate (IFA) and Early Childhood Family Associate (ECFA)

#### Prevention/Early Intervention:

- Infant Family Specialist (IFS) and Early Childhood Family Specialist (ECFS)
- Infant Family Reflective Supervisor (IFRS) and Early Childhood Family Reflective Supervisor (ECFRS)

#### Treatment/Clinical Intervention:

- Infant Mental Health Specialist (IMHS) and Early Childhood Mental Health Specialist (ECMHS)

#### Macro:

- Infant Mental Health Mentor (IMHM) and Early Childhood Mental Health Mentor (ECMHM) - Clinical, Policy, and Research/Faculty

The Infant Massage USA Certification Training satisfies most of the knowledge/skill areas, across all domains, for Infant and Early Childhood Family Associate, Infant/Early Childhood

Family Specialist, and Infant/Early Childhood Family Reflective Supervisor. Slightly less is covered for the Infant/Early Childhood Mental Health Specialist and Infant/Early Childhood Mental Health Mentor.

The primary focus of Infant Massage services provided is the social-emotional needs of infants/toddlers. Services include attention to the relationships surrounding the infant/toddler\* by coaching parents to observe the infants' cues of engagement and disengagement. Before touching their child, they are guided to ask the child permission to establish a trusting/respectful relationship. During instruction, parents are supported to observe and respond to their baby's needs. There are no "performance standards" for the parent or the infant. As parents learn new stroke techniques, they can see which strokes the baby likes and some that the baby might be more sensitive to. We want to support the parent as the expert of their child through guiding them in ways to get to know their baby better and helping those who are unsure feel more comfortable meeting their baby's needs.

As the parent and baby interact, they gain pleasure from each other. If their baby cries, parents are encouraged to meet the baby's need: when necessary, instructors provide ideas for ways parents might do that (diaper change, holding baby, feeding baby, etc.). Infant Massage is taught over 3-5 weeks depending on the baby's receptiveness. Different educational topics are covered in each session starting with understanding how their baby is communicating with them. Instructors and parents discuss their baby's behavioral states, reflexes, cues, and cries to better understand parents' experiences with their babies, and to ensure that parents understand important components of infant development that can greatly impact the parent-infant relationship if parents don't understand them. What comforting techniques do they use? Do they feel they are bonding with their baby? How does their baby like tummy time? What do they think about singing songs or nursery rhymes with their baby? We also discuss other topics that are important to them, including the reality of parenting, sleep deprivation, poop, adjustment to the parenting role, and new skills their babies are developing, among others.

## Theoretical Foundations

The instructor informally (and in some cases, formally) observes and assesses the infant or very young child, parent, and their relationship to identify landmarks of typical child development and behavior as well as healthy and secure patterns of relationships.

- During observations and assessments, instructors notice emerging competencies of the infant and very young child within a relationship context and share those with the parent. For example, "He is just watching your face intently as you are talking to him while you massage him."
- Instructors also support and reinforce each parent's strengths, emerging parenting competencies, and positive parent-infant/very young child interactions and relationships. For example, "It is fun to watch how sensitive you are to his needs. You knew just what he needed, and he stopped crying right away after you picked him up. I can see he is used to having his needs met."







Instructors also help parents to: "See" the infant/very young child as a person, as well as all the factors (playing, holding, teaching, etc.) that constitute effective parenting of that child and derive pleasure from daily activities with their children.

In a similar vein, instructors:

- Share with families realistic expectations for the development of their infants/very young children and strategies that support those expectations
- Demonstrate familiarity with conditions that optimize early infant brain development
- Recognize risks and disorders of infancy/early childhood conditions that require the assistance of other professionals from health, mental health, education, and child welfare systems
- Share with families an understanding and appreciation of family relationship development
- Apply understanding of cultural competence to communicate effectively, establish positive relationships with families, and demonstrate respect for the uniqueness of each client family's culture

## Direct Service Skills

For infants/toddlers and their families referred and enrolled for services, instructors:

- Establish trusting relationships that support caregivers and infant dyads as the attachment relationship develops.
- Provide services to children and families with multiple, complex risk factors - Formally and informally observe the parent(s) or caregiver(s) and infant/very young child to understand the nature of their relationship, developmental strengths, and capacities for growth.
- Provide information and assistance to parents/or caregivers to help them:
  - Understand their role in the social and emotional development of infants and toddlers
  - Understand ways they can foster health, language, and cognitive development in infancy and early childhood
  - Find pleasure in caring for their infants/very young children

- Nurture the parents' relationships with each other, if one exists; alternatively, help the custodial parent manage appropriate contact with the non-custodial parent
- Promote parental competence in:
  - Facing challenges
  - Advocating on behalf of themselves and their children
  - Resolving crises and reducing the likelihood of future crises
  - Solving problems related to basic needs and familial conflict

## Working with Others

Instructors build and maintain effective interpersonal relationships with families and professional colleagues by:

- Respecting and promoting the decision-making authority of families
- Understanding and respecting the beliefs and practices of the family's culture
- Following the parents' lead
- Following through consistently on commitments and promises
- Providing regular communications and updates
- Work with and respond to families and colleagues in a tactful and understanding manner

- Provide positive, specific feedback to encourage and reinforce desired behaviors and interactions in families
- Assist families to develop the skills they need to become their own advocate
- Encourage parents to share with other parents (e.g., through nurturing programs, parent-child interaction groups)
- Provide emotional support to parents/caregivers and children when sad, distressed, etc (or offers some ideas on other community supports?)

## Communicating

Instructors:

- Actively listening to others; asking questions for clarification
- Using appropriate non-verbal behavior and correctly interpreting others' non-verbal behavior
- Communicating honestly, sensitively, and empathetically with families; using non-technical language
- Obtaining translation services as necessary to ensure effective communication with families who may experience a communication barrier





As a Certified Educator of Infant Massage (CEIM), we have a wonderful tool to model parent/infant interactions. With the doll, we demonstrate asking permission and listening to what babies have to say back to us. Our program is quite concrete for parents who are hands-on with their babies as instructors observe and support parents in their loving interactions with their babies. For parents who have difficult interactions or “difficult” babies, we empathically listen, and discuss parents’ feelings, and how they would like to address their difficulties. Oftentimes, the experience of responsive physical contact and respectful touch interactions are rewarding for both parents and babies in these challenging situations.

We also teach parents strokes that stimulate all of the systems and senses of the baby’s body. We can see the parent/baby interaction and can share with the parent, “Looks like Lilly is enjoying that stroke.” Or “I’m noticing Harold doing a little kick with his left leg. What does that mean?” During the session, we talk and support the parent to see the baby and to share in the joy of watching the baby grow and develop

throughout the weeks of the session. We listen to parents’ concerns, using active listening techniques, empowering them to find solutions that work for them, and giving ideas for where to turn when they need additional assistance.



| Knowledge/Skills Area Addressed                 | Designation for IMH-E |               |               |               |               |
|---|-----------------------|---------------|---------------|---------------|---------------|
|   | IFA                   | IFS           | IFRS          | IMHS          | IMHM          |
| <b>Theoretical Foundations</b>                  |                       |               |               |               |               |
| Pregnancy and Early Parenthood                  | Partially met         | Partially met | Partially met | Partially met | Partially met |
| Infant/Young Child Development and Behavior     | Partially met         | Partially met | Partially met | Partially met | Partially met |
| Infant/Young Child Family Centered Practice     | Met                   | Met           | Met           | Met           | Met           |
| Relationship-based Therapeutic Practice         | Met                   | Partially met | Partially met | Not addressed | Not addressed |
| Family Relationship and Dynamics                | Met                   | Partially met | Partially met | Partially met | Partially met |
| Attachment, Separation, Trauma, Grief, and Loss | Partially met         | Partially met | Partially met | Not addressed | Not addressed |
| Cultural Humility                               | Met                   | Partially met | Partially met | Partially met | Partially met |
| Disorders of Infant/Early Childhood             | Not addressed         | Not addressed | Not addressed | Not addressed | Not addressed |

| Knowledge/Skills Area Addressed        | Designation for IMH-E |               |               |               |               |
|--|-----------------------|---------------|---------------|---------------|---------------|
|  | IFA                   | IFS           | IFRS          | IMHS          | IMHM          |
| <b>Direct Service Skills</b>           |                       |               |               |               |               |
| Life Skills                            | Partially met         | Partially met | Partially met | Partially Met | Partially Met |
| Observation and Listening              | Met                   | Partially met | Partially met | Partially met | Partially met |
| Screening and Assessment               | Not addressed         | Not addressed | Not addressed | Not addressed | Not addressed |
| Responding with Empathy                | Met                   | Met           | Met           | Met           | Met           |
| Advocacy                               | Not addressed         | Not addressed | Not addressed | Not addressed | Not addressed |
| Safety                                 | Partially met         | Partially met | Partially met | Partially met | Partially met |
| <b>Working with Others</b>             |                       |               |               |               |               |
| Supporting Others                      | Met                   | Partially met | Partially met | Partially met | Partially met |
| Building and Maintaining Relationships | Met                   | Met           | Met           | Partially met | Partially met |
| Collaborating                          | Not addressed         | Not addressed | Not addressed | Not addressed | Not addressed |
| Resolving Conflict                     | Not addressed         | Not addressed | Not addressed | Not addressed | Not addressed |
| Empathy and Compassion                 | Met                   | Partially met | Partially met | Partially met | Partially met |
| <b>Communicating</b>                   |                       |               |               |               |               |
| Listening                              | Met                   | Met           | Met           | Partially met | Partially met |
| Speaking                               | Met                   | Met           | Met           | Partially met | Partially met |



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|-----------------------------------|-----------------------|---------------|---------------|---------------|---------------|
|                                   | IFA                   | IFS           | IFRS          | IMHS          | IMHM          |
| <b>Thinking</b>                   |                       |               |               |               |               |
| Analyzing Information             | Partially Met         | Partially Met | Partially Met | Partially Met | Partially Met |
| Solving Problems                  | Partially Met         | Partially Met | Partially Met | Partially Met | Partially Met |
| Exercising Sound Judgement        | Partially Met         | Partially Met | Partially Met | Partially Met | Partially Met |
| Maintaining Perspective           | Partially Met         | Partially Met | Partially Met | Partially Met | Partially Met |
| Planning and Organization         | Partially Met         | Partially Met | Partially Met | Not addressed | Not addressed |
| <b>Reflection</b>                 |                       |               |               |               |               |
| Contemplation                     | Partially Met         | Partially Met | Partially Met | Partially Met | Partially Met |
| Self-Awareness                    | Partially Met         | Partially Met | Partially Met | Partially Met | Partially Met |
| Curiosity                         | Met                   | Met           | Met           | Partially Met | Partially Met |
| Professional/Personal Development | Partially Met         | Not addressed | Not addressed | Not addressed | Not addressed |
| Emotional Response                | Partially Met         | Partially Met | Partially Met | Partially Met | Partially Met |