

PREPARING FOR THE MI-AIMH ENDORSEMENT EXAMINATION

Infant Mental Health Specialist (Level III)

Part I – 60 Multiple Choice Questions – 90 minutes

Part II – Response to two of three Clinical Vignette/Scenarios – 90 minutes

What is important when preparing for Part I and Part II of the exam?

1. Your work experiences with infants and toddlers and families, where you are working from a relationship-based perspective practicing infant mental health, are crucial.
2. Your experience of reflective supervision, individual or group, is also important.
3. Your study of the following topics, learned in a university program, through intensive infant mental health in-service trainings & workshops, and self-study is the third component. Opportunities to reflect on what is learned with colleagues and senior clinicians helps to better ensure integration of theory into practice.
 - a. Pregnancy, childbirth, and the newborn period.
 - b. Attachment theory and early relationship development.
 - c. Caregiving practices and caregiving behaviors.
 - d. Family, parenting and child care issues.
 - e. Infant and toddler development in all domains: social, emotional, cognitive, language, and physical.
 - f. Temperament and individual differences in infancy and early childhood.
 - g. Indicators of risk, identified disturbance or disorder, as well as capacity, in infancy, early childhood, and early parenthood.
 - h. Infant mental health practice.
 - i. Best practice infant mental health assessment, diagnoses, and treatment approaches.
 - j. Cultural competence.
 - k. Reflective supervisory practice (Level IV – Clinical)

Infant Mental Health Mentor – Clinical (Level IV)

Part I – 60 Multiple Choice Questions – 90 minutes

Part II – Response to two of three Clinical Vignette/Scenarios – 90 minutes

One clinical vignette/Scenario is a supervisory vignette/scenario and must be answered from the perspective of the supervisor.

One of two clinical vignettes/scenarios must be answered from the perspective of the infant mental health specialist/practitioner.

What is important when preparing for Part I and Part II of the exam?

1. Your work experiences with infants and toddlers and families, where you are working from a relationship-based perspective practicing infant mental health, are crucial.
2. Your experience of reflective supervision, individual or group is also important.
3. Your experience as a supervisor/consultant who has provided or is providing reflective supervision to practitioners working with infants, toddlers, young children and parents/caregivers is a third important guide.
4. Your study of the following topics, learned in a university program, through intensive infant mental health in-service trainings & workshops, and self-study is the third component. Opportunities to reflect on what is learned with colleagues and senior clinicians helps to better ensure integration of theory into practice.
 - a. Pregnancy, childbirth, and the newborn period.
 - b. Attachment theory and early relationship development.
 - c. Caregiving practices and caregiving behaviors.
 - d. Family, parenting and child care issues.
 - e. Infant and toddler development in all domains: social, emotional, cognitive, language, and physical.
 - f. Temperament and individual differences in infancy and early childhood.
 - g. Indicators of risk, identified disturbance or disorder, as well as capacity, in infancy, early childhood, and early parenthood.
 - h. Infant mental health practice.
 - i. Best practice infant mental health assessment, diagnoses, and treatment approaches.
 - j. Cultural competence.

- k. Reflective supervisory practice (Level IV – Clinical)

Infant Mental Health Mentor – Policy (Level IV)

Part I – 60 Multiple Choice Questions – 90 minutes

Part II – Response to one of two Policy Vignette/Scenarios – 90 minutes

What is important when preparing for Part I and Part II of the exam?

Part I: 60 Multiple Choice Questions

The following topics will be very important to study for Part I of the exam.

- a. Pregnancy, childbirth and the newborn period.
- b. Attachment theory and early relationship development.
- c. Caregiving practices and caregiving behaviors.
- d. Family, parenting and child care issues.
- e. Infant and toddler development in all domains: social, emotional, cognitive, language, and physical.
- f. Temperament and individual differences in infancy and early childhood.
- g. Indicators of risk, identified disturbance or disorder, as well as capacity, in infancy, early childhood, and early parenthood.
- h. Infant mental health practice.
- i. Best practice infant mental health assessment, diagnoses, and treatment approaches.
- j. Cultural competence.
- k. Reflective supervisory practice.

Part II: Policy Response to a Qualitative Question

You will rely on your extensive leadership experience with the infant-family field ensuring the promotion and practice of infant mental health. In particular, you are encouraged to consider:

- a. Funding
- b. Systems development
- c. All that is required to promote change across systems

Infant Mental Health Mentor – Research/Faculty (Level IV)

Part I – 60 Multiple Choice Questions – 90 minutes

Part II – Response to one of two Vignette/Scenarios – 90 minutes

What is important when preparing for Part I and Part II of the exam?

Part I: 60 Multiple Choice Questions

The following topics will be very important to study for Part I of the exam.

- a. Pregnancy and childbirth.
- b. Attachment theory and early relationship development.
- c. Caregiving practices and caregiving behaviors.
- d. Family, parenting and child care issues.
- e. Infant and toddler development in all domains: social, emotional, cognitive, language, and physical.
- f. Temperament.
- g. Indicators of risk and capacity in infancy, early childhood, and early parenthood.
- h. Infant mental health practice.
- i. Infant mental health assessment, diagnoses, and treatment approaches.
- j. Cultural competence.
- k. Reflective supervisory practice.

Part II: Research Response to a Qualitative Question

You will rely on your extensive research and teaching experience in the infant-family field related to the study of pregnancy, infancy, early childhood and early parenthood; attachment security and relationship needs; risk and resiliency in the early years; caregiving practices; early assessment and intervention strategies, and the mental health needs of infants and toddlers, to name a few.