



Child Vignettes

Maya: Home-Based

1-year-old Maya lives with her mother, grandmother, and teenage uncle in a large, high-rise apartment building. Maya was born early and spent her first few weeks of life in the neonatal intensive care unit. Maya is a reluctant eater, and it takes some time for her to take her bottle. She has some tightness in her legs, and her medical providers have suggested that she may eventually get a diagnosis of cerebral palsy. She shows developmental delays in all developmental domains. She is generally easy-going, except at times when she overtires or before feedings. She is interested in her surroundings.

Maya and her mother, Imani, developed a complicated, but workable schedule. Imani takes courses at the community college in the morning and cares for Maya in the afternoons. She works a late shift at a nursing home a couple of nights each week. Maya’s grandmother cares for Maya in the mornings while Imani is at school. By mid-afternoon, grandmother leaves for a restaurant where she waits tables five days a week. Maya’s uncle or the next-door neighbor offer child care when both Imani and grandma are gone. Maya’s mother and father have not been a couple since Maya was born. Her father lives in the same city. He visits, but only rarely.

Maya is eligible for Part C early intervention. She is also enrolled in Early Head Start, in the home-based option. The Part C and Early Head Start home visitors arranged to make their visits together at the same time each week. Imani also tries to take Maya to the Early Head Start socialization group that meets at a neighborhood center every other week, but she often has other appointments. Maya goes to outpatient physical therapy at the medical center twice a month, and she goes to a feeding clinic at least once a month at the same medical center.

Imani takes Maya to her appointments on the public bus.

IFSP Outcomes and Objectives

Outcomes	Current Objectives
Eat more easily and tolerate more foods	<ul style="list-style-type: none"> • Eat pureed food • Pick up and eat finger foods
Sit with decreasing amounts of support	<ul style="list-style-type: none"> • Sit with support at hips
Play while in prone position	<ul style="list-style-type: none"> • Reach when on tummy • Tolerate rolling when helped
Increase vocalizations	<ul style="list-style-type: none"> • Vocalize when playing back and forth games • Vocalize when looking at books or being read to
Use two hands together	<ul style="list-style-type: none"> • Clap hands or bang toys together • Use two hands to pass back and forth, hold toy and play
Reach and grasp objects	<ul style="list-style-type: none"> • Reach, grasp, and explore toys • Reach, grasp, and put finger food in mouth

The family has some outcomes and objectives as well:

- Imani will learn and then do daily physical therapy exercises with Maya.
- Imani and grandmother will keep track of Maya’s food intake.



Damian: Family Child Care

Damian is a 6-month-old boy who lives at home with his mother, father, sister, and a brother. They live in a small town. Damian’s father works in nearby seasonal, agricultural factories. His mother lost her job when she did not return to the factory after Damian was born. She now works a few shifts each week at a convenience store. Damian and his sister, who is of preschool age, are both cared for by Ms. Gracie, who runs a family child care home. Their older brother is in elementary school and goes to an after-school child care center.

Damian was born with Down syndrome and a heart defect that was recently corrected with surgery. This has helped with his stamina and energy for playing and interacting with others. His muscle tone is very low, and his motor skills are quite delayed. His parents hope that, now that his heart has been repaired, he will get stronger. Damian shows developmental delays in all developmental domains.

Damian is eligible for Part C early intervention services. A home visitor comes to the family child care every other week for a one-hour visit. The home visitor also makes a Saturday morning visit to Damian’s home every other week. Damian also receives occupational and speech therapy. The therapists come to his home about once a month. Damian’s parents would like to meet other parents of children with Down syndrome. There is a parent group at the early intervention center located in the next town, but it meets during the day and Damian’s parents are not able to attend. They are active in their church and get support from other families there. The family service coordinator calls or emails Damian’s family about once a week to help coordinate all these activities.

IFSP Outcomes and Objectives

Outcomes	Current Objectives
Increase time spent on tummy	<ul style="list-style-type: none"> • Raise head and chest when on tummy • Maintain position when propped on arms when on tummy
Increase coordination of eyes and hands	<ul style="list-style-type: none"> • Watch and reach for toy or person’s face when playing game with family member • Hold and shakes rattles or other toys
Increase strength for sitting	<ul style="list-style-type: none"> • Maintain sitting position and maintain head control when supported at chest or when sitting between adult’s legs
Increase vocalizations	<ul style="list-style-type: none"> • Smile, make sounds and/or increase body movements when playing games or looking at books with others

Marcus: Center-Based

Marcus is 2-and-a-half years old. He currently lives with a foster family that includes four other children and a mother and father. He has been in this foster home for about five months. Before that, he lived for different amounts of time with his mother, with his grandmother, and then with another foster family. Marcus’s biological mother remains involved, visiting him inconsistently. She has been in drug rehabilitation programs in the past. She currently lives with a friend and works part time. Marcus’ grandmother visits periodically, but is not able to care for him due to health limitations. His father is not involved.

Marcus is enrolled in a child care center that has a partnership with an Early Head Start program. He attends every day. He is also eligible for Part C early intervention, based on significant developmental delays in both the social-emotional and language domains. He also shows mild delays in cognition. Marcus benefits from trauma-informed care, and can become easily frustrated. When he becomes frustrated, he tends to yell and lash out. His educators



report that he is starting to learn some words and that his aggressive behaviors are starting to decrease. They also say that Marcus requires a lot of their time and attention throughout the day. Marcus is eligible for speech and language services, and the speech pathologist sees him individually for short sessions twice a week. She also comes to his classroom once a week to consult with the teachers. The mental health specialist from the Head Start program helped the educators to write a behavior plan for Marcus, and visits the child care center every week. There are nine children in Marcus's group with a lead teacher, assistant teacher, and aide. Two other children in the group have special needs; one child has global developmental delays, and one child is very shy and withdrawn.

Marcus's foster parents have attended several parenting programs as part of their participation in the foster parent program. His foster mother meets with the family services worker and mental health specialist often in order to coordinate behavior strategies between home and the center.

IFSP Outcomes and Objectives

Outcomes	Current Objectives
Plays with other children in typical activities	<ul style="list-style-type: none"> • Take turns with help in small group and on the playground • Play near other children at learning centers, with minimal outbursts • Participate in circle time with minimal outbursts
Uses words to request and comment	<ul style="list-style-type: none"> • Use new words each week • Say name when asked
Increases receptive vocabulary	<ul style="list-style-type: none"> • Follow 1-step directions with gesture or picture • Point to objects or pictures when named
Decrease physical outbursts	<ul style="list-style-type: none"> • Use words, gestures or pictures to request or comment • Use individual picture or object schedules for classroom activities