

Effective Strategies for Family Communication and Engagement

Katie Miller: Hello, and welcome to our session on effective strategies for family communication and engagement. My name is Katie Miller, and I am from the National Center on Early Childhood Development, Teaching, and Learning. I'm a content specialist, and I work in a variety of topics. But this one is near and dear to my heart as it includes some of each of my favorite parts of early childhood. And I'll turn it over to my colleague Yvette to introduce herself.

Yvette Dominguez: Hi, everybody. And thank you, Katie, for having me here today. My name is Yvette Dominguez. I am a regional T/TA integrative systems team manager for the National Center on Parent, Family, and Community Engagement. And, as Katie said, this is a topic that is very near and dear to my heart as well. And we are excited to be here with all of you today.

Katie: Great. We want to start by just really centering a few of our learning goals, we hope that participants will have a deeper understanding of what families of children with disabilities might experience as part of having a young child with a disability or suspected delay. We also hope that learning about family experiences can help participants understand how you might be able to provide support and build relationships that promote positive outcomes for families and children. And then, finally, we hope that participants will be able to identify strategies that you can use to build equitable, responsive relationships and to communicate effectively with families. We'll start by talking about why it's so important to understand family experiences and how this fits into the big picture of our work with families, which is, of course, foundational to Head Start and Early Head Start programs.

Yvette: Yes. Thank you, Katie. And when we talk about parents, when we talk about families, we always end up talking about the Parent, Family, Community Engagement framework. We're going to start out today with talking about the PFCE framework. You'll be hearing me saying that throughout the presentation. And really what we're doing is with the Head Start PFCE framework is that this is really our roadmap for everyday practices to support our programs, systems, and services. And it is vital that we recognize that every family is unique. They have unique situations, unique experiences, and that we are unique as well. We all want to walk alongside each other. We all want to partner. And we want to make sure that, through those relationships that we build, that we build, mutual respect, trust, and a sense of belonging with every single family that might walk into our programs.

And, as you can see on your screen, we have two arrows. First one is that positive goal-oriented relationships. And that weaves in through our yellow column, which is our program foundations, which is our systems. And this is looking at our own roles, understanding our policies and procedures, our professional development, and our data. We're also looking at our pink columns, of the program impact areas. And this is our integrative systems. This is what we do every single day for children and families in our programs. And this is even as teachers, disabilities coordinators, home visitors, family services staff and even our community partners, this is where we all partner together, to support children and families in their outcomes within their outcomes at their homes or at school. And this is everything to do with comprehensive

services. This is looking at our strengths, our needs for every children and family. We want to make sure that we connect to our families, our staff members, and all our community partners. We have some of these highlighted for you today.

The first one is our family partnerships because that's what we're talking about today's, those partnerships with our families, as well as two of our family outcomes, which is our families as lifelong learners and families in engagement in transitions. We want to make sure that we keep these in mind because these are the basis as to what we support children and families. With that, I want to turn it over back to my friend Katie to talk about some DEC practices.

Katie: Great. Thanks, Yvette. In addition to being a critical activity when using the PFCE framework, understanding the experiences of families of children with disabilities is a Division for Early Childhood of the Council for Exceptional Children, which is also known as DEC, that rolls off the tongue a little easier, recommended practice. DEC is an international professional organization for those who work with or on behalf of young children from 0 to 8 with disabilities and other special needs and their families. The family strand of these recommended practices focuses on using practices that are family centered, collaborative, and that enhance family capacity and self-efficacy.

While understanding individual family experiences is relevant to many of the recommended family practices, there are a few practices that are particularly reliant on understanding the experiences to provide services and supports that are individualized, flexible, and responsive to each family's unique circumstances. Today we're going to share some strategies to address what these practices look like in action.

The first is Recommended Practice F1, and it's labeled as F1, just to indicate that it's in a family strand. But, in practice F1, practitioners build trusting and respectful partnerships with the family through interactions that are sensitive and responsive to cultural, linguistic, and socioeconomic diversity. Recommended Practice F3, practitioners are responsive to the family's concerns, priorities, and changing life circumstances. I think this is especially relevant right now in the midst of a pandemic to really highlight this practice as important to the work that we do. Practice F7, practitioners work with the family to identify, access, and use formal and informal resources and supports to achieve family identified outcomes or goals. We'll talk a lot more about that as we continue through our session on how to work through some of those ideals.

Great. We highlighted a few of those DEC Recommended Practices, but we really want to make sure and emphasize that they are connected to the work that we already use within the framework for effective practice, which is familiar to many Head Start staff. But we'll highlight a little bit about that in case this is a little bit newer if you're new to Head Start. The work of the coordinated approach really aligned strongly with the framework's foundation and its center. The foundation represents the nurturing, responsive, and effective interactions and engaging environments. And then the center of the framework is parent and family engagement, which acknowledges that this partnership is critical and informs all components of the framework, hence it being at the center of that house. The left-hand pillar indicates the importance of very intentionally using these foundational practices within the structure of curriculum. And the right-hand pillar depicts the ongoing use of data for making decisions about when to inform planning at the roof, which is where education staff will individualize more carefully and

systematically for children who benefit from specialized instruction and modifications and accommodations to the general curriculum.

Consistent across that PFCE, Parent, Family, Communication, Engagement Framework, the DEC Recommended Practices, and the framework for effective practice is that importance of communication and engagement with families. Hopefully you'll be able to see how these practices support each other rather than feeling like they duplicate the work that they all work together effectively to promote these great practices.

Yvette: Hi there, Katie. I think all these systems support each other, and it's not siloed work. Every time that we work with families, it has a team. Let's talk a little bit about our partnering with families. Now that Katie has walked us through the DEC recommended practices, the framework for effective practice, and I've talked a little bit about the PFCE framework, let's ground ourselves in why these are so important in helping families and children achieve positive outcomes.

Let's talk a little bit about families with children who have delays or suspected delays, right. And let's talk about their experiences with this. Many times we have families coming into our programs, either on Head Start, Early Head Start, and they're going through a lot. It's not just with going into a disability or a diagnosis. Families just go through a lot in any given day. We want to make sure that, throughout this experience, we acknowledge what families are going through. And this could be experiences either through a disability, through a delay; or even through a pandemic, like Katie alluded to earlier.

Let's talk about those experiences, those reactions, and needs for support that individuals or families might be needing. Throughout this conversation that we're going to go through, just keep in mind that some of the experiences that we might talk about, situations emotions, or needs for support might not be for every single family, but want to acknowledge what the majority of families might be experiencing.

With that, let's talk about with an open mind without assumptions, and with a sincere desire to get to know families, let's talk about some family adaptations and a process that sometimes occurs over time, so talking about this common reactions, processes, and emotions that family sometimes report with an incoming diagnosis, disability, or delay. Knowing about these experiences may help us as disability coordinators, as teachers, as family service staff really feel prepared to establish those goal-oriented relationships and that mutual trust and support for families.

With that, let's look at some of those adaptations. And keep in mind that some of these adaptations, they're fluid. Their perceptions and needs might change over time. I want to put that together, too, for you. But as I said before, because we are in this age of enrolling children into our programs that are Head Start, Early Head Start programs, we're often meeting those families that are just learning about their child's disability diagnosis. We want to make sure that we're supportive. We're that guide on the side for families and for children. Many times we're walking with them, once they have that disability and that diagnosis. We're going through every single emotion with them and every single experience with families once they're going through this process. It's important for us to keep that in mind. And sometimes, like I said before, these

reactions to these diagnoses are very individual. And we want to make sure that we keep these in mind.

The first reaction that we have, as the family adaptation emotional reaction is a relief or a hope, of having somebody corroborate what our family has been experiencing. What as a parent has been my concerns. Somebody's actually listening to me. There could be some relief, some hope that there is something here, there is something that I can do for my child.

The other one is a confirming that there's something there for my child's behavior, that there's an explanation for what we've been going through as a family and that, as a relief and hope, that families have access to services for their child.

The other reaction, common reaction that families might experience or have is guilt or anger. Sometimes it's an attribution of the cause of the event. Families might feel guilty or angry of this. And we know, that families are resilient. Families know what they're doing. They're the experts of their child. But sometimes there's those feelings involved. We want to make sure that we acknowledge those and communicate those with the family that it's not their fault, that the anger that they might feel is not shouldn't really be there, but it's a natural human reaction. And the other one is the search of explanation or meaning related to their child's diagnosis.

The other emotion that we see is grief. This might be a loss of what they've planned for their child, what they've envisioned for the future. And it's reimagining what they could do, how they can adapt. Sometimes there is a part of this grieving process. But also, thinking of families might feel pressure to locate and begin services, some of that lost time.

Some of these on your screen are those common emotions that we might see. Not for everybody, because we know that everybody's different. But we wanted to acknowledge that and make sure that we all understand that and have that in the back of our minds. That time period where children and families are going through this diagnosis, it can be emotional. It can be confusing and stressful for families. We want to make sure that we reappraise or begin to view their child's diagnosis in a different perspective and move through this process with them. We want to make sure that we take those strength-based attitudes and practices and support the family through this adaptation process.

But just as important as it is to talk about those emotional pieces, we also want to make sure that we look at other family adaptations. As you can see on your screen, we want to make sure that we acknowledge that not all these adaptations and outcomes are all the same. Everybody is individual because everybody, every child is unique. Everybody has a different diagnosis, different identification of disability or delay. We want to make sure that we keep thinking those pieces.

But here are some outcomes that support not support but that we've had families report that this is what they're experiencing at times whenever this delay comes in. And even if there's families that with children that don't have a disability or delay, they might experience some of these pieces, too, so it's very important for us to have that partnership and that communication with families.

But some of these pieces that we've seen is increased social isolation; increased levels of emotional support, including a risk of depression and anxiety; and increased risk of poor physical outcomes. This could be high blood pressure, ulcers, migraines, and headaches. Being just you sometimes can be stressful. Day to day life can be stressful. We want to make sure that we're that guide on the side of families to support them throughout this process, whether they have a diagnosis or disability for their child or if they don't. We want to make sure that we maintain those relationships with them.

The information here is just a high-level look of some of that set foundational information of this adaptation and those individual outcomes of what families might be experiencing, and something for us to keep in mind whenever we keep partnering with families and supporting them throughout these processes.

With that, we want to make sure that we acknowledge that these experiences aren't just negative or that people experience these in the same degree. We know that families are resilient. And we know that families can vary through some of these pieces that just mediating factors that you see on your screen in different ways and intensities. We want to make sure that we keep in the back of our minds when we're partnering with families on how families react, cope, and adapt to their child's diagnosis and to some of these factors.

And some of these factors include that level of financial strain. This could be particularly stressful for families who have a diagnosis but especially something with medical fragile, thinking to themselves, How am I going to pay for this? Or availability of child care. Yes, we support most of that within our supports and settings. Many times they might need access to respite care or other settings out in the community.

The other is the accessibility of support services. Partnering up with our community partners and figuring out what it is that the family needs at this point in time. Also, the levels of isolations that we talked about, figuring out that amount of personal time that families might need, that me time, too, because we want to make sure that, as we mentioned in the previous side, that they don't get those adverse reactions or to minimize those reactions that they might have. And also, that perception of satisfaction and available support and just supporting everybody all around.

And we want to make sure that we keep these responses and situations in mind so we can best support the family and within our own team and programs that we support the family as best as we can so they can continue to realize all the hopes and dreams and outcomes that they need and want and continue to be the resilient family that they know we know that they can be. All right. With that, let's go into some family supports and priorities. And I'll pass it back to Katie.

Katie: Thanks, Yvette. We discussed some common family experiences during the time immediately after a child is identified as having a disability or delay. And these experiences and the experiences that families encounter during the evaluation diagnostic process have a direct impact on the family's needs for support.

We know that learning that their child has a disability or delay can bring about challenges, questions, and demands that many families never expected to encounter. And, again, while the

resources and support that each family needs will be unique based on their individual family experiences, there are some common needs or priority areas for support that families commonly expressed in the period following their child's initial diagnosis.

As some of those are summarized on the screen, I'll share with you as well. Some of those priorities might be the need for information about the child's disabilities. Many families express a need for information that's individualized to their questions and concerns and in a format, including their home language, that they can access.

Many families experience the need for emotional or social support as well. We know that support comes in different forms, which we often refer to as formal or informal support. Formal supports might include information about, referrals to, or support accessing more formal services or supports in a program or the community; mental health supports; family support groups; or, as Yvette mentioned, respite care.

Informal supports might be the people like their family, friends, or other parents who might already be a part of the family's network, or they might be new connections that family that, pardon me, that program staff may facilitate. Both types of support are important, but satisfaction with informal supports is more strongly linked to positive family outcomes.

Families might also express needing support accessing these resources, including time. Support locating resources for child care or instrumental resources such as financial assistance for special equipment or medication might be really important as well. Many families also need support to access educational, medical, or other services related to their child's disability. Attempting to locate and access services can be stressful to families, and they might benefit from support identifying and eliminating potential barriers to accessing those services.

And then, last, support for advocacy may be a priority for many families. There are many different ways that disability services coordinators and other programs staff can support families to develop those advocacy skills, including helping educators prepare to communicate with families about their rights in different systems; helping educators and families learn the vocabulary of the different systems for the child's disability; helping families learn and use skills that help them collaborate and communicate with different professionals and participate as a full essential member of their child's team; and being the bridge between the family and Part C and the LEA, also explaining the roles each person plays throughout the process. And the LEA is the local education agency, which might be the public school. Also not duplicating efforts or overwhelming families with information but carefully coordinating and planning the who, what, and why of each conversation.

Again, this is a very high-level look at what we know about common family priorities in the time diagnosis and another reminder as we work with families to understand their priorities and provide support how important strong coordination and collaboration amongst team members will be to ensure that support provided is clear, consistent, and that we don't overwhelm families with our supports.

Before we move on to talking about strategies that program staff can use to build positive goal-oriented relationships and communicate with families, let's take a quick look at the experiences of families of children with disabilities during the pandemic.

As we have discussed, family coping, resilience, and adaptation is a process that really does occur over time. Different life experiences or events such as transitions can influence the family adaptation process and impact their needs for support. The pandemic and subsequent changes across many areas of life for children and families has definitely had an impact on their experiences, outcomes, and needs.

We know that the pandemic has had an impact on all families of young children, but we also know that families of children with disabilities have experienced disproportionately greater challenges, which might have included higher rates of financial hardship; emotional distress; health disparities, including a higher percentage of children with disabilities missing their well child visits; less access to emotional social support; less access to remote service delivery. And as programs returned to fully in person services, it's really critical that staff continue to partner with families to understand how the pandemic has impacted their child and their family so that we can best understand their individual needs for support.

With these times, we really need to determine what do we want to ask families to develop relationships, establish trust, and engage them? How can we support these relationships through these communication strategies? As I run through a couple of examples of some questions, take a moment to reflect on your own about some of these questions.

What do we know is important to the family right now? What are the family's expectations for their child's development and participation? What are the family's expectations for the program? How are you incorporating children's and their family's assets and strengths into your work with children and families? These and there are plenty of other questions, I'm sure, that can help you reflect and prepare, but these are a great place to start. And now I will turn it back to Yvette to talk about family engagement.

Yvette: Sure. Thanks, Katie. Now that we've talked about that importance of experiences of outcomes, possible needs for families and children with disabilities, let's explore some strategies and practices that we as program staff can use to engage families to understand their unique strengths, needs, and priorities.

Let's take a look at some effective family engagement pieces. On your screen, you do see some effective family engagement strategies. But I really want to highlight to you that family engagement is that process. It's those genuine relationships that we talked about at the beginning of our session today that really create that engagement. And it creates strong parent child relationships, it creates family well-being, and it creates just better outcomes for everybody. We want to make sure that we keep in mind what does that engagement look like. And so that those are, again, based on those relationships by that trust, safety and caring and mutual respect of ourselves, our families, and us as a group. And, also, we want to make sure that we pay close attention to the emotional quality and interactions that we have with anybody that we encounter in our programs, in our personal or professional lives.

Why is this important? Well, for children it's important because it gives that meaningful engagement with the family for them to lead those relationships to support children's health development and school readiness. For families, that is that it promotes that safety, that trust but also that well-being, for their families at home and their children. And for us as staff, that

gives us that trust to have these conversations with families, whether they're great conversations or sometimes very uncomfortable conversations to address. But it gives us that confidence and that mutual trust and respect to do.

The other piece that we wanted that I wanted to highlight today is some characteristics of this relationship-based practice. And the beginning we talked a bit a little bit about those relationships that strength-based practice, but we wanted to highlight on your screen these six steps of relationship-based practice.

And as we reviewed earlier, we want to make sure that we acknowledge and reflect on the family's perspective and experience. And this could be identifying that delay, reviewing the IEP IFSP goals. Or even going through a pandemic like Katie was talking about earlier, we want to make sure that we support family relationships, passion, and competence, because they're experts of their child and of their family. We want to make sure that we follow these characteristics and support that relationship with families.

The other piece to this is highlighting a resource that is in your resource widget. And a link to this is the relationship-based competencies or the RBCs. And the RBCs can be very helpful to family service staff, teaching staff, home based staff, managers, supervisors, and even disabilities coordinators, to support with the knowledge, skills, and practices in relationship-based practices.

And, for example, we have within those RBCs supports on leaderships and advocacy practices. Supporting the leadership and advocacy of a family through their IEP or IFSP process, or skills on family access to community resources. And this could be of figuring out what it is that families need during the time of their IEP or IFSP. Or during those times have those high emotions like we talked about.

Also, even parent child relationships or families as lifelong learners in supporting their goals, including the participation in their IEP or IFSPs. That's one resource that I wanted to highlight. But the other that I wanted to highlight is these communication strategies. And fostering those relationships takes that communication, to support and build those trusting and meaningful communication and relationships. And that is really a two-way piece.

With that, I want to go into some communication strategies of not only just honoring family's culture and language experiences and looking at family's story but also some communication strategies of how we can connect in connected conversations. I'm going to ask Katie to talk about those pieces for us.

Katie: Great. I think we've highlighted a few times, but I will highlight one more time this idea that communication is an integral part of fostering positive relationships and engagement. In developing and strengthening relationships, we want to create spaces that support authentic interactions that are meaningful for families. And I emphasize those two words very deliberately, authentic and meaningful. Being true to who we are, who they are but also making sure that the conversations serve a purpose, and they support families in ways that are relevant to them. We want to provide opportunities for two-way communication with families that's based on their passion for their child, mutual respect, and trust.

Let's explore how we can engage families through connected conversations, using our strategies of before conversation, during a conversation, and after. As we go into this section, I want to ask you to just take a quick pause and think about for yourself how can we connect to the family's expertise about their child, diagnosis, strengths, and concerns to engage with their IEP or IFSP team.

I'm going to pause just a second and ask you to put yourself in that place as we approach the connected conversations. Let's start with our before. Before we approach these conversations, let's think about how we prepare both the physical and emotional environment. We can show warmth, respect, and inclusive attitudes and behaviors to create that welcoming environment. We want to meet families where they're at, taking into account the child and the family's IEP or IFSP diagnosis and goals.

Some of the questions that you might want to think about as you prepare these physical and emotional environments include, Does the environment support these conversations in terms of security or safety? The child might be medical fragile or immunocompromised, and have we prepared appropriately for that? What does my environment offer that might feel inviting to families? Are there images and pictures that show that the program and staff care about families? Examples of that might include photographs of children and families and children's artwork. And then what can we learn from families to inform how to alter this physical, social, and temporal environment to promote participation, engagement, and learning of their child?

We want to learn about our own perspectives, reflect on our thoughts and feelings because this is important to relationship building. Reflection really gives you an opportunity to learn and make decisions about your approach with the families. Consider, Am I feeling scared or overwhelmed? Do I know what I want to say and what I should avoid saying? What thoughts or biases might I have about the family situation that I should prepare for? And am I prepared to provide a connection to community resources, should the parents share an interest in making that connection?

We want to learn about the family's perspective. What might they be thinking or feeling? Ask yourself, do the family members see me as someone with whom they can work together as partners? Will they need to access resources provided by community partners? Of course, we always want to ensure that we know that family's preferred language. You might be sharing some very specific information about the child's diagnosis, services, and other resources. We want to ensure that this information is accessible.

And, of course, as we've said a couple times, Yvette has really highlighted so well, acknowledge the individual before the situation that they might be experiencing. Recognize that their circumstance or situation does not define them and will be unique to them. Understanding of family's culture takes curiosity, sometimes patience, commitment, and a willingness to learn and to feel uncomfortable at times, particularly if families share information that might be difficult to process. It takes courage and humility to reflect on your own experiences and to understand how they affect your attitudes towards families as well. Oh. I'm sorry. I went a couple too many. Too many clickings.

Yvette: No worries. That's fine, Katie. Let's continue on with this conversation. Katie has highlighted so well the conversations before we meet with families. What does that look like when we're in that conversation, in that meeting with families? Well, the first thing is and we've talked about this so many times in this presentation is be that guide on the side. We want to recognize the family members are the experts of their family and their situation, that we focus on their strengths, and that we look for ways to partner together.

Remember, family engagement means that we do with families and not for families. It's a partnership. And we also want to make sure that we are open with families on asking for that permission. If we can give advice, sometimes if we can even take notes at times. Some of those conversations can be a bit touchy. We want to make sure that we make that we ask for that permission and we explain why we're asking for it to do a referral or to support them in the way that we're supporting them in that meeting. You can ask. You can even say things like, When you're ready, let's talk about this. Sometimes in that moment, families might not be ready.

We also want to make sure that we're flexible, that we, within these conversations, we ask them that, if they're here, that they're here; but if they're not ready, that whenever they need us, that we're there for them or whatever they need to be with them, that it's OK for them to come back and work with us at a different time. But, most importantly, during these conversations, we want to be present and that we listen carefully and that we use silence to support what the family might be feeling or are experiencing at that moment, to take time to listen to their stories and support them through what they may be going through.

With that, we also want to talk about that after piece, after the conversation, after that meeting, what is it that we're referring. We're doing our paperwork. We want to make sure that we're also supporting the family after our conversations, that we're flexible, that we're present with families and that we're a warm handoff. If we're supporting families with a referral, that we support them with that piece and that we're a warm handoff with families that way everybody feels supported throughout the whole process. But, with that, we wanted to give you a bit of a reflection piece of thinking about these connected conversations, the strategies that we've talked about, and also supporting you all with what is one concrete step that you can take to implement any of these strategies that we've talked about today.

Katie: Encourage you if you if you're able to take some time and think about this, maybe outside of this time together today. Consider these ideas that we've suggested. Talk to your team. If you're attending with your team, that's even better so you can talk through some of these ideas and how you might be able to put them into action. Once more, thank you so much for joining us.

Yvette: Thank you. Take care.