EI/ECSE Standard 2 Component 2.1 Overview & Speaker Notes

Intended Audience:

Overview for Facilitators:

ECPC has developed an anchor presentation for each of the Initial Practice-Based Professional Preparation Standards for Early Interventionists/Early Childhood Special Educators (EI/ECSE). The components under each standard are presented separately. The materials are designed for an in-service professional development (PD) program but can be used in a pre-service teacher preparation course. This resource will increase professionals' ability to address each of the EI/ECSE standard and components. Additional materials for each standard can be found on the ECPC Website: <u>Curriculum Module | The Early Childhood Personnel Center (ecpcta.org)</u>

Speaker Notes

The speaker notes provide a narrative and activities for each slide. You will see speaker notes for most of the slides within the slide deck. The notes provide additional details about the information on a particular slide, including the context for the information and key points. The notes are a guide, and speakers should feel free to modify these as needed. Please note the following:

• The narrative is a sample script for the presenter. Although you may read it verbatim, speaker notes are intended as a guide for the presenter, and you may modify them as needed.

Materials Required for face to face

- 1. Share the outline with timelines for the training (build in breaks)
- 2. Conduct an opening activity (introductions/ice breaker)
- 3. Computers or tablets with internet access for participants (if possible)
- 4. Handouts
- 5. Projector with audio capable for playing video with speakers
- 6. Presentation slides with speaker notes
- 7. Develop an evaluation tool for all attendees (e.g., continuous improvement activity)

Materials Required for virtual

- 1. Distribute the link to the online platform in advance
- 2. Share the outline with timelines for the training (build in breaks)
- 3. Conduct an opening activity (introductions/ice breaker)
- 4. Determine how participants will receive handouts and materials, on the cloud, using a storage platform (e.g., dropbox, google, etc.)
- 5. Platform to share presentation (e.g., zoom, teams, etc.) with polling questions prepared in advance and breakout room capability
- 6. Upload or send handouts in advance or through platform (insert through chat)
- 7. Download videos ahead of time to prepare for low bandwidth from slide deck

- 8. Share screen capability (be sure to enable sound for videos)
- 9. Develop an evaluation tool for all attendees (e.g., continuous improvement activity)

Objectives for Standard 2, Component 2.1:

After participating in this professional learning opportunity, participants will be able to:

- Describe the elements of family systems theory.
- Describe biological, environmental, cultural, and societal factors that influence a family system.
- Describe family-centered practices that foster trusting, respectful, affirming, and culturally responsive partnerships with families.
- Describe strategies that facilitate the mutual exchange of knowledge and information between professional(s) and a family.

Торіс	Slides	Activity
Introduction/Objectives	1-4	
Activity: What is Family	5-6	Discussion
Family Systems Theory	7-8	
Activity: Building Adult Capabilities	9-10	Activity (Slide 9) Video (Slide 10)
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Building Capacity	12	
Engaging Families to Build	13	
Capacity		
Capacity-Building: 4 Types	14	
Contrasting Approaches to EI/ECSE	15	
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Capacity Building Practices	16	
Capacity Building Caregiving	17	
Opportunities		
Family-Centered Practice: Principles of	18	
Effective Help-Giving		
Effective Partnering With Families	19	
Family-Centeredness	20-24	Discussion (Slide 23)
		Activity (Slide 24)
References and Resources	25-27	

Outline of Session Activities

Speaker Notes with Slides

Slide 1	<u> </u>	
Silue I		
	Family-Centered Practices	
	Initial Practice Based Professional Standards for Early	
	Interventionists/Early Childhood Special Educators (EI/ECSE)	
	2.1	
	ECPC	
	Indy Childhood Instance Contex week applicang	
Slide 2		
	Standard 2	
	Candidates use their knowledge of family-centered practices	
	and family systems theory to develop and maintain reciprocal	
	partnerships with families. They apply family capacity-building	
	practices to support families in making informed decisions and advocating for their young children. They engage families	
	in opportunities that build on their existing strengths, reflect	
	current goals, and foster family competence and confidence	
	to support their children's development and learning.	
	E C P C	
Slide 3		
	Component: 2.1	
	 Candidates apply their knowledge of family- 	
	centered practices, family systems theory, and the	
	changing needs and priorities in families' lives to	
	develop trusting, respectful, affirming, and	
	culturally responsive partnerships with all families	
	that allow for the mutual exchange of knowledge	
	and information.	
	E G P G	
Slide 4		
Shac	Objectives	
	Describe the elements of family systems theory.	
	Describe biological, environmental, cultural, and societal factors	
	that influence a family system.	
	 Describe family-centered practices that foster trusting, respectful, affirming, and culturally responsive partnerships with families. 	
	Describe strategies that facilitate the mutual exchange of	
	knowledge and information between professional(s) and a family.	
		
	E C P C	
	www.eduresi	

Slide 5	 What is a Family? Uter when the work or more people who regard themselves as a family and who carry out the functions that families typically perform These people may or may not be related by blood or marriage and may or may not usually live together 	 Begin the presentation by asking the group what their definition of a family is. Support the idea as folks answer that the concept of family can be defined and understood many different ways. After this discussion, click once again and the definition offered by Turnbull et al (2015) will display. Ask the group to hold their responses in mind to this definition as they move through the presentation. You will return to this in the activity at the end.
Slide 6	Families are Systems "What happens to one member of a family happens to all" (turbull, turbull et al., 2015.p.1)	
Slide 7	Family Systems Theory Warner Warner Warner Warner Warner Warner Main and formal social units: • Neighbors, friends, places of worship, systems of physical and mental health care, educational systems, employment, systems of access to food, transportation, housing, policy, legislation, and policing)	Turnbull, A., Turnbull, R. Ersin, E.J., Soodak, L.C. & Shogren, K.A. (2015). <i>Families, Professional and</i> <i>Exceptionality</i> , 2015, Pearson.
Slide 8	 Family Systems Theory, Continued These connected networks/systems surround and include the family, continually influencing each other, reverberating between and across all family members. Families can't fully support healthy child development in isolation! Interventions must focus on the family within their natural network of systems, not just on the child alone. 	

Slide 9	-	https://developingchild.harvard.edu/resources
	Activity	/building-adult-capabilities-to-improve-child-
	Watch the video on the following slide	outcomes-a-theory-of-change/
	What systems impact child development? How?	
	 Can you make a difference in child outcomes without considering adult capabilities? 	
	How do you serve/empower adults in your work with	
	children with disabilities and delays?	
	E C P C	
Slide 10	ww.apt.ug	https://developingchild.harvard.edu/resources
0	Video:	/building-adult-capabilities-to-improve-child-
	Building Adult Capabilities to Improve Child Outcomes	outcomes-a-theory-of-change/
	E C P C E	
Slide 11		
	Empowering capacity: Family Centered Practice	
	Family involvement in early childhood intervention	
	is an essential component for promoting child	
	learning and development.	
	• Family-centered refers to a particular set of beliefs,	
	principles, values, practices for supporting and	
	strengthening family capacity to enhance and promote development and learning.	
Slide 12	ting Otheral Insured Game www.aptr.cog	
Silue 12	Building capacity	
	Capacity-building family-centered practices	
	empower families and promote self-efficacy across	
	social networks and systems	
	Require a relationship based on mutual trust and	
	respect	
	E C P C	
	linh Oldhool Hosmal Catur www.cpct.org	

Slide 13	<text><text><list-item><list-item><list-item></list-item></list-item></list-item></text></text>	 Friedman, D. (2006). What Science Is Telling Us: How Neurobiology and Developmental Psychology Are Changing the Way Policymakers and Communities Think about the Developing Child. Perspectives. <i>National</i> <i>Scientific Council on the Developing Child</i>. Shonkoff, J. P. (2017). Breakthrough impacts: What science tells us about supporting early childhood development. <i>YC Young</i> <i>Children, 72</i>(2), 8-16. National Early Childhood Technical Assistance Center, 2008 Carl J. Dunst & Carol M. Trivette (2009) Capacity-Building Family- Systems Intervention Practices, Journal of Family Social Work, 12:2, 119- 143, DOI: <u>10.1080/10522150802713322</u>
Slide 14	Capacity-building: 4 types (stepted from Dunst, 2010)	
	 A model or paradigm for structuring how EI/ECSE providers work with families 	
	 A set of empowering practices that build and strengthen family capacities 	
	 A process of building knowledge and skills to promote responsive caregiving and child development 	
	A goal to strengthen family member self-efficacy beliefs	
Slide 15	Contrasting Approaches to El/ECSE Practices	Dunst & Trivette, 2009
	Capacity-Building ModelsTraditional Models• Promotion• Treatment• Empowerment• Expertise• Strength-based• Deficit-based• Resource-based• Service-based• Family-centered• Professional-centered	
	E C P C by bitter frameward care www.rept.org	

Slide 16		
Silue IU	Capacity Building Practices	
	Relational practices	
	Compassion, respect, active and reflective listening, trust,	
	empathy, effective communication	
	 Include practitioner beliefs and sensitivity to family and cultural strengths, values as part of intervention practice 	
	Participatory	
	• Actively involve the family in choices and decision-making,	
	developing family skills needed to obtain resources and supports - with flexibility and responsiveness	
	ECPC	
	Enly Diffield Transmit Center www.capitr.org	
Slide 17	Capacity Building Caregiving	Liu, S., Phu, T., Hurwich-Russ, E., Mcgee, D.,
	Opportunities	Watamura, S., Fisher, P. (2021) Improving
	 Building capacity for family members to positively 	caregiver self-efficacy and children's behavioral
	engage in everyday activities and routines	outcomes via a brief strength-based video
	Increased frequency of positive interactions	coaching intervention: results from a
	supports the learning and development of children	randomized control trial. Prev Sci (2021).
	Increased frequency of positive reciprocal	https://doi.org/10.1007/s11121-021-01251-6.
	interactions support self-efficacy of caregiving	
	adults	
	Enty Oktime Rosenia Gana www.apit.org	
Slide 18	Family-Centered Practice: Principles of	Capacity-Building Family-Systems Intervention
	Effective Help-Giving	Practices
	 Positive and proactive in the context of trust 	Carl J. Dunst & Carol M. Trivette
	Offered in response to an indicated need	Pages 119-143 Published online: 08 May 2009
	Engages families in choices and decisions	
	Culturally normative and appropriate	
	 Include opportunities to reciprocate Enhances self-efficacy 	
	 Promote acquisition of effective strategies that decrease the 	
	need for help in the future	
	Enty Official Con- weaking	
Slide 19		https://connectmodules.dec-
	Effective Partnering With Families Description of family-professional partnership framework	sped.org/connect-modules/learners/module-
		4/step-3/a-definition/
	A. Definition Connect Modules (dec-sped.org)	
	Early Gibbool Innormal Center werkungste ang	

Slide 20		
0	Family-Centeredness	
	 Treat families with dignity and respect 	
	Individualized	
	• Flexible	
	Responsive practices	
	Linguistically relevant	
	Culturally responsive	
	e o 2 o	
Slide 21	<text><section-header><list-item><list-item><section-header><section-header><list-item><section-header></section-header></list-item></section-header></section-header></list-item></list-item></section-header></text>	Meeting families where they are takes time, often more time than we feel we have when there is so much paperwork, and so many things to be done to get services in place. But effective intervention cannot be accomplished before we fully understand who the family and their child are, their circumstances and priorities, and making sure we are making it possible for them to engage with services by acknowledging threats to their wellbeing (lack of access to safe housing, adequate nutrition, mental health services) from the start, and finding links to address those threats. We want to be mindful about their previous experiences with helping professionals – have they been positive, negative? Might they feel that your presence is a threat to their family, based on previous experiences? How can we help families understand our presence as equals rather than as authorities? We also want to understand how the words we
		We also want to understand how the words we use – delay, disability, deficit – are landing for them. Often, parents of children with newly- identified concerns are everybolized by these
		identified concerns are overwhelmed by these words, and can't make clear decisions when
		,
		they are dealing with a "fight – flight – freeze"
		response as providers share results of
		assessments and talk about plans. It's OK to
		notice the words that family members
		themselves use to describe their child's

		concerns, and to talk to them about how discussions about delay or disability might feel for them - always using functional and strength-based language from the start.
Slide 22	<text><list-item><list-item><list-item></list-item></list-item></list-item></text>	 Bradshaw, W. (2013). A framework for providing culturally responsive early intervention services. Young Exceptional Children, V. 16 (1). We also want to formalize time before – and after - every meeting with families that creates personal space for us to question our assumptions about how families are, what their priorities are, their expectations for their children, and the ways they interact with each other. [Facilitator can provide examples from their own experiences, and ask the group if they can think of any experiences where they noticed that the culture of the family really stood out to them as being different from their own, and how that influenced their practice. Working during the discussion to support the idea that even when family values are very different, we must notice and adjust our

		perspective when we are privileging our own
Slide 23	<section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header>	values].Before jumping into the question about supporting social interactions, address the primal importance of the family's preferred language and how they use the family's primary language for visits and/or use interpreters, unless the family is fully bilingual. Also support discussion of the fact that she and her family are still processing a new diagnosis – how can the team, in the process of evaluation and planning, make sure that Carlos is being represented at all times as a unique, whole, and competent member of his family?Support discussion that EI/ECSE staff need to
		 honor the reality that Luz may not have a lot of time outside of working hard to make a living, keeping her house picked up and prepare food for her family. Support discussion that it might be interesting to hear how she had positive interactions with own mother – often there are times during washing up, getting dressed, preparing food, that young children have many positive interactions with their parents.
		Support discussion that important interactions can happen during everyday routines – for instance, if he is taking off is shoes after coming home from the store, she can join him by taking off her own shoes, making a song about what is doing, commenting on the color of his socks, celebrating his success when the shoes come off (with or without support). During meal preparation, Carlos can be given materials that Luz uses in the kitchen to manipulate in ways that he enjoys, and Luz can comment on what he is doing and provide functional models with her own actions, like stirring ingredients in her pot – even if Carlos may be using the materials differently. The most important things to remember is that

		 learning opportunities that reinforce the desire to be in the company of others, rather than leave the interaction completely – are vitally important for young children with ASD. Always acknowledging that it is not easy to include a young child in everyday routines, and at the same time celebrating when he can stay present and share attention during daily interactions.
		If Carlos has cousins or peers around - they can be invited to hand him interesting objects, join him in physical games that Carlos likes(like jumping, which his mother says he likes) give him materials like cars to help him join them and do what they do. Support discussion that siblings/peers are powerful models and interventionists!
Slide 24	 Activity: Antonia and Her Family ECPC Case Study: Family Centered Practice What effective strategies or practices were implemented to facilitate the development of a trusting, respectful relationship between Hailey (primary service provider) and Jennifer (Antonia's mother)? What additional strategies or practices could have been implemented to support the well-being of this family? 	https://ecpcta.org/wp- content/uploads/sites/2810/2021/01/Case- Study-Antonia-Family.Centered.Practice-1.pdf Have groups read the case study, paying close attention to how Hailey, the PT and primary service provider, worked to develop trust and include Jennifer, Antonia's mother, in decisions about services for Antonia.
		What strategies or practices were implemented to facilitate development of a trusting, respectful relationship between Hailey and Jennifer? What additional strategies or practices could have been used to support the wellbeing of this family? Use the resources on the right side of the case study to support the answers to the question and draw out discussion about barriers to well- being.

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Slide 25	Deferences and Decourses	https://www.pearson.com/us/higher-
	References and Resources	education/product/Turnbull-Families-
		Professionals-and-Exceptionality-Positive-
	Turnbull, A., Turnbull, R. Ersin, E.J., Soodak, L.C. & Shagrap, K.A. (2015). <i>Exercision Replaced and</i>	Outcomes-Through-Partnerships-and-Trust-
	Shogren, K.A. (2015). <i>Families, Professional and Exceptionality</i> , 2015, Pearson	
		6th-Edition/9780137070480.html
	Dunst, C.J. & Trivette, C. (2009) Capacity-Building	
	Family-Systems Intervention Practices, Journal of	https://www.tandfonline.com/doi/full/10.1080
	Family Social Work, 12:2, 119- 143, DOI: 10.1080/10522150802713322	/10522150802713322
		<u>10522150002715022</u>
		•
Slide 26		http://w.puckett.org/presentations/FamilyCap
0	References and Resources	BuildEarlyChildInt 11 2010.pdf
		Bundlariyennume 11 2010.put
	• Dunst, C.J., (2014). Family capacity-building in early	
	childhood intervention: effects of parent and child	
	competence and confidence. Orelena Hawks	
	Puckett Institute, Asheville, N.C. Presentation at the	
	Eighth National Congress on Early Intervention with	
	Young Children and their Families, Aveiro, Portugal	
	Enty Differed Ansured Enter wex.co/cc.anj	-
Slide 27		https://ecpcta.org/
	References and Resources	
	Early Childhood Personnel Center	https://ecpcta.org/cross-disciplinary-
	<u>Cross-Disciplinary Competencies</u>	competencies/
	Harvard Center on the Developing Child	
	https://developingchild.harvard.edu/resources/buildin	https://developingchild.harvard.edu/
	g-adult-capabilities-to-improve-child-outcomes-a-	<u>inteps://developingemid.natvard.edu/</u>
	theory-of-change/	
	 Head Start Parent, Family, and Community Engagement 	https://developingchild.harvard.edu/resources/buil
	Framework (hhs.gov)	ding-adult-capabilities-to-improve-child-outcomes-
	La C P C	- <u>a-theory-of-change/</u>
	www.copic.org	
		https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf
		/pfce-framework.pdf
		<u>/pice iranework.pur</u>