

November 10, 2024
OTAC 2024 Session 113: 2 hours
**Partnering with Parents:
Collaborative Coaching in Early Intervention**
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Objectives

- 1. Identify the key elements in fostering family partnerships to provide authentic family-centered services using culturally responsive coaching strategies.
- 2. Describe the challenges and supports in using a three-step approach to foster family partnerships
- 3. Apply this three-step approach of using a theoretical framework to understand family routines and then build on these family strengths with case presentations

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Synopsis

Many occupational therapy practitioners working in early intervention struggle to effectively engage caregivers in collaborative coaching partnerships during families' activities of daily living. This session will describe how coaching strategies can be effectively used to provide culturally responsive practice with families.

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Culturally Responsive Practice

- According to the National Center for Culturally Responsive Educational Systems (NCCREST), “cultural responsiveness is the ability to learn from and relate respectfully with people of your own culture as well as those from other cultures.”
- By being culturally responsive, that is, being respectful of their backgrounds and home cultures, occupational therapy practitioners can more effectively collaborate with parents to focus on the parents’ own cultural knowledge.
- A culturally responsive approach also helps occupational therapy practitioners realize that one’s culture is central to learning and development. The way we receive information and process it is culturally based.

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Principles of Family-Centered Intervention

Bruder et al, 2019

- Family is the constant
- Facilitate collaboration at all levels of service
- Share information with parents
- Encourage family to family support – Parents Helping Parents groups

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Principles of Family-Centered Intervention

Bruder et al, 2019

- Understand and incorporate developmental needs into service delivery
- Implement comprehensive policies and programs to support families
- Recognize family strengths and methods of coping
- Design accessible services that are culturally competent

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Family Engagement



“Family engagement refers to the systematic inclusion of families in activities and programs that promote children’s development, learning, and wellness, including in the planning, development, and evaluation of such activities, programs, and systems”
 (U.S. Department of Health & Human Services & U.S. Department of Education, 2016).

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Part C of IDEA

- Individuals with Disabilities Education Act (IDEA) provides guidance and direction for service providers
 - Part C addresses services for infants and toddlers, ages 0-3
 - Part B addresses the educational services for children, ages 3+
- Part C of IDEA stipulates that services be provided in natural environments
- The service plan is designed to specifically to support the family – Individual Family Service Plan (IFSP)

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Three Step Approach

- Contextualize the family system using theoretical models
 - Focus on the family system even though services provided due to identified concerns with the infant/toddler
 - Include occupational analysis of family system in planning process
 - Strengths in the family and social system
 - Challenges in the family and social system
- Building a therapeutic alliance with families
 - Support in creating true family-centered goals that are culturally appropriate
 - Focused on the interaction with the family as part of the family’s identified culture
- Use of the coaching strategies to guide services

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Theoretical Models

- Why do we use theoretical models?
 - To conceptual frame our intervention
- What models can be used to support providing authentic family-centered intervention using telehealth?
 - Bronfenbrenner’s Bioecological Systems Theory
 - The Ecology of Human Performance developed by Dunn et al., 1994

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Family-Centered Intervention

- Bronfenbrenner Bioecological Systems Theory
 - Theory articulates five systems that are interrelated
 - Microsystem: things that have direct contact with the child in their immediate environment, such as parents, siblings, teachers and school peers. Relationships in a microsystem are bi-directional
 - Mesosystem: at this level a person's individual microsystems do not function independently, but are interconnected and assert influence upon one another
 - Guy-Evans, 2020


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Family-Centered Intervention

- Bronfenbrenner Bioecological Systems Theory
 - Exosystem: formal and informal social structures, which do not themselves contain the child, but indirectly influence them as they affect one of the microsystems.
 - Macrosystem: cultural elements affect a child's development, such as socioeconomic status, wealth, poverty, and ethnicity.
 - Chronosystem: all of the environmental changes that occur over the lifetime which influence development, including major life transitions, and historical events.
 - Guy-Evans, 2020

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The ultimate outcome of intervention according to Bronfenbrenner




“The developmental indicator important for assessing children’s growth is how their behavior unfolds to match or more closely approximate that of others within the social and cultural contexts (systems) in which they naturally would be participants.”

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The five Bioecological Systems of Bronfenbrenner as described and viewed by Guy-Evans (2020) in a child’s environment.

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Culturally responsive services considers the family system as defined by the family

The occupational therapy practitioner needs to include members identified by the family and may include grandparents, parental siblings and close friends

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Family-Centered Intervention

- **Ecology of Human Performance**
- Addresses the complexity of the environment and provides a framework to consider environmental contexts as an important factor during assessment and intervention
- The primary focus rest in the interaction among the person, the environment and the task during occupational engagement
 - Dunn et al, 1994

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Family-Centered Intervention

- **Ecology of Human Performance**
- Think of how often you have heard parents say their child can stack their own blocks on the floor while the parent observes their child struggle to stack the standardized test kit blocks on the table during the evaluation process
- Performance occurs when the person interacts within the environment to engage in tasks
 - Dunn et al, 1994

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Family-Centered Intervention

- **Ecology of Human Performance**
 - Wallisch & Little, 2021

EHP Intervention	Intervention Focus	Early Intervention Example
Establish & Restore (Learn something new)	Person	Potty training and the OT assists family in establishing a new routine; however the OT needs to consider how the new routine fits in the family routines
Alter (Find a better place)	Context	OT helps a parent find a toddler-friendly with play structures that provide an opportunity for toddler interaction such as lower playscapes

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Family-Centered Intervention

- Ecology of Human Performance
 - Wallisch & Little, 2021

EHP Intervention	Intervention Focus	Early Intervention Example
Adapt (Make it easier)	Task & Context	The OT suggests use of bowl with a suction cup bottom to make it easier for the child to scoop from the bowl
Prevent (Think ahead)	Person, Context, Task	Parents use forced choice for the child to select between two options or parents use a sequential picture board to help with transitions between activities
Create	Person, Context, Task	Place child's toys on a lower shelf to allow ease of access and ease to clean up after play

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Service Delivery for Family Centered Services

Principles of Family Centered services focused on family functioning

Services can take several forms focused on coaching and supporting families:

- Virtual (telehealth)
- In-person
- Combination

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How do these theories translate to practice?

- Occupational therapy practitioners need to consider the following when engaging families and supporting cultural routines
 - The ecological focus of both theories/models aligns with the entire family and the factors that should be considered in providing services
 - Creating a therapeutic alliance by respecting and supporting the family's preferred cultural engagement

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Strategy to Support Family-Centered Intervention

- PDSA is a continuous quality improvement strategy
- **Plan** - problem identification, analyze problem, clarify goals, define success, determine "who", plan strategies
- **Do**- implement and perform the plan, perform plan, determine how to collect data, collect data
- **Study**- analyze data collected, what went well, what could be changed, did we achieve the goals?
- **Act** - communicate, implement changes as needed, goal reformulation
 - (Knudsen et al., 2019)

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Our Daily Routine!

The family identifies the important daily routines

The occupational therapy practitioner partners with the family to provide options and information to create and reinforce daily routines

Small group activity: with 2-3 others identify one routine you address in your early intervention practice

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Daily Routines for Early Intervention

Role of the Occupational Therapy Practitioner

- Mealtime – cultural expectations
- Feeding and eating – independence versus dependence in self-feeding
- Bedtime – includes sleeping arrangements
- Toilet Training – timing and cultural/societal demands
- Bathtime and washing hands
- Brushing teeth
- Dressing – expectations for independence
- Play with toys
- Play with others

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Routines provide a pattern for daily life with punctuated exceptions!

Saturday often punctuates the week with some change in the daily routine!

A cartoon illustration of a young boy with spiky hair, wearing a patterned shirt, sitting up in bed. He has a wide, excited smile and is shouting. A speech bubble above him contains the text: "IS IT? IT /S! IT'S SATURDAY! OH BOY!".

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Brushing Teeth Routine

Before a meal?
After a meal?
Twice a day?
Type of toothbrush?
Toothpaste?

A cartoon illustration of a young girl with dark hair, wearing a yellow t-shirt with a heart and blue pants. She is standing and brushing her teeth with a red toothbrush.

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Creating Developmentally Appropriate and Culturally Responsive Practices

- A core consideration in developmentally appropriate practice and cultural responsiveness is that occupational therapy practitioners learn about each child and family and intentionally adapt and respond to each child's strengths and needs (Cople & Bredekamp 2009; Derman-Sparks & Edwards 2009).
- Culturally responsive practice is often defined as using the experiences and perspectives of children and their families as a tool to support them more effectively (Gay 2002). As this approach is child and family centered, it sets the stage for critical relationship building (Ford & Kea 2009).

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Parenting Styles and Cultural Expectations

- The four types of parenting styles are:
 1. **Authoritarian parenting:** These parents are strict and demand blind obedience from their children. The reason for rules is typically coupled with: "because I said so."
 2. **Authoritative parenting:** These parents are strict and have clear standards of behavior. But they are also loving, warm, and nurturing.
 3. **Permissive parenting:** These parents offer a great deal of autonomy to their children and are warm, loving, and nurturing.
 4. **Neglectful parenting:** These parents take the hands-off approach and don't get involved in their children's lives.

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Culture Shapes Developmental Expectations

- The society and culture in which one grows up influence everything from developmental milestones and parenting styles to what kinds of hardship one is more likely to face.
- While biological milestones such as puberty tend to be universal across cultures, social milestones, such as the age at which children begin formal schooling or individuate from their parents, can differ greatly from one culture to the next.
- Effective parenting styles also vary as a function of culture. While the authoritative parenting style is the style that is most encouraged in modern American society, other cultures value more authoritarian styles.

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Culturally Responsive Practice

- To be culturally responsive, it is important that expectations reflect the values and cultures of families and teachers and other staff in the school.
- For example, in a culture where community is valued over independence (Ford & Kea 2009), guidelines for some activities (like snack) may emphasize relationship-building behaviors—passing the food bowl—over independent adaptive skills—taking an appropriate portion of a self-serve snack.

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Culturally appropriate routines are endorsed by the family and taught to the child through repeated opportunities

The occupational therapy practitioner supports the family in establishing the routines in an energy efficient manner

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Theoretical Framework to Understand the Family Context – Occupation of Play

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Authentic Family-Centered Intervention

Bruder et al, 2019; Lorio et al 2020

- Utilizes the Family Centered Principles in a dynamic approach
- Includes reflection as a key aspect of the intervention process
- Builds on family current strengths and adds options for families

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Therapeutic Relationship Building Strategies to Support the Relationship



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Coaching Model

King et al , 2019; Lorio et al. , 2020; Schweltnus et al, 2020; Ziegler et al, 2020

Definition: Building family capacity to enhance child's development through a collaborative process
The following elements are included in the coaching model

- Joint Planning
- Information Sharing
- Observation
- Direct Teaching
- Demonstration or modeling
- Problem solving
- Reflection

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Coaching is initiated by identifying the family strengths to build upon those strengths within the culturally appropriate environment



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Coaching Model Building on Family Strengths

Ziegler et al, 2020



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Coaching Strategy	Definition
Joint planning	A conversation between the EI provider and the caregiver to discuss how learned strategies can be embedded into activities or routines during or between intervention sessions.
Information sharing	The EI provider and the caregiver share comments and questions with each other related to early intervention as well as child/family outcomes, concerns, and priorities.
Observation	The EI provider observes the caregiver without providing any suggestions or feedback.

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Coaching Strategy	Definition
Direct teaching	The EI provider provides the caregiver with new information and explicit explanations of intervention strategies, child development, and how/why to embed specific strategies. Information is presented verbally or through print and/or video.
Demonstration and modeling	The EI provider models intervention strategies for the caregiver and oftentimes provides simultaneous narration to support the caregiver's understanding.
Practice	The caregiver practices using intervention strategies with the child and receives guidance and feedback from the EI provider. Practice may include recommendations and suggestions from the provider (guided practice) or opportunities for independence with feedback provided after the practice opportunity (caregiver practice).

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Coaching Strategy	Definition
Feedback	The EI provider offers feedback related to caregiver's intervention strategy use or the child's response. Feedback may be general ("Good job on helping "NAME" play with that toy!") or specific ("Great work using wait time to support his ability to request the toy on his own.").
Problem solving	The EI provider and the caregiver identify problems and discuss how to improve interactions, caregiver strategy use, and child responses by identifying changes that could be made in future practice opportunities.
Reflection	The EI provider and the caregiver evaluate what went well or what was challenging focusing on thoughts or feelings related to the intervention and child progress.

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Coaching Model Building on Family Strengths

- Differentiate between training and coaching (Ziegler et al., 2020)
 - Parent training relies on expert model with therapist as director
 - Coaching model relies on use of a collaborative model taking direction from the parent
- Changes in OT perceived impact (Schwellnus et al., 2020)
 - Change in the therapists' perception of roles
 - Increased service effectiveness
 - Enhanced client capacity

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Small Group Activity

With a partner, discuss how you could use a coaching model with a specific family and the potential advantages in using this model.

Describe a potential situation where a training model may better meet the family's needs.

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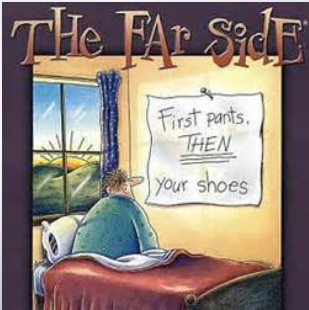
Coaching Model Building on Family Strengths



- Greater opportunity to build sustainability in skills using a coaching model (carryover of skills)
- Family identifies needs and collaborates on selecting the strategies that best fit the family routines (intervention that is appropriate for the family AS DETERMINED BY THE FAMILY!)
- Support the role of the parent
- Douglas et al, 2020

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Coaching Model Supports Family Habits and Routines



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Small Group Activity and Case Presentation

- Early intervention services initiated when a 19-month-old female was placed in a foster home
- Neglect and substance abuse identified as factors in removing the child from birth parent
- Child presented with significant delays in cognitive, emotional, language, motor, and self-care skills
- Foster family of similar ethnic/cultural background as birth family
- No clear neurological diagnosis but motor skills were significantly delayed and negatively impacted all self-care skills
- Initial referral to address motor and self-care skills particularly the child's over stuffing mouth during meals, poor motor coordination, and poor hand skills limiting functional abilities such as playing with toys and use of utensils & overed cups during meals
- Where would you start your early intervention services?

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Benefits of using the Coaching Model


- Goals embracing family concerns and interests resulted in better outcomes
 - Douglas et al, 2020; Graham et al, 2020
- Use of solution-focused coaching sessions includes pauses where both family members and OT consider options
 - Requires reflective listening skills
 - Goals are jointly established using the coaching model using a co-construction approach
 - Benefit of telehealth – parents specify the needs within the family related to the child and the community
 - 10 second pauses used during session for effective consideration of options
 - King et al, 2019; King et al, 2020; Schwellnus et al, 2019

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COACHING STRATEGY

Salisbury et al, 2017

A unique aspect of the family capacity-building framework is the focus on the caregiver's sense of confidence and competence in supporting their child. Providers support caregivers in knowing how to increase or decrease supports as the child grows and learns, how to adapt strategies to new contexts and as challenges arise, and how to share this information with other important family members who can also implement the intervention



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Evidence to support use of Telehealth

- Telehealth is a recognized approach to provide authentic occupational therapy services
- Meta-analysis examining the effectiveness of telehealth services similar to face-to-face intervention (Speyer et al, 2018)
- Provision of telehealth services in rural and remote communities was very effective and parents felt their children actually did better through the telehealth services (Hines et al, 2019)
 - Consistent with person-centered practice
 - Relationship based nature of telepractice
 - Technology as a vehicle for service delivery

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Facetime/Zoom/Phone call


- Meeting the family at their level
- Natural environment without the physical influence of the OT practitioner
- Greater degree of family control

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Family Perceptions of Using Telehealth

Yang et al, 2021

- Preference for in-person visits
- As a supplement, not a replacement
- Telehealth is better than nothing



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Challenges of Telehealth from the Family Perspective

Cole et al, 2019; Yang et al, 2021

- May not be able to meet the child's needs
 - Child needs physical guidance and in-person socialization with therapists
 - Children get easily distracted or lack attention
- May not be able to meet the family's needs
 - Parents lack the confidence to implement strategies
 - Family perceptions of needed logistical items for telehealth
 - Access to high-speed internet and unlimited data plan
 - Access to electronic devices
 - Access to materials
- Perception that telehealth services will not be as effective as in-person therapy

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Telehealth Challenges - Words from Families

- "Initially I was very nervous about not having my therapist physically being there....I was afraid that I would not be good enough to help my son"
- "Often I was not sure if I was doing it right"
- "I missed having the personal contact and connection"
- "It's not the same as in-person"
- "Sometimes it was hard to see and understand what I should do because the therapist couldn't show me in person"
- "It is difficult at times for my daughter to stay focused and interact virtually"

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Strategies to Address Telehealth Challenges

- Listen to parent concerns
- Provide training to clinicians and others using telehealth in EI
- Provide training coaching techniques
- Develop assessment tools specifically for telehealth
- Develop family-friendly training materials
- Provide technical support to families

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Therapeutic Relationship Building Supports and Challenges using Telehealth



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Family Perceptions of Advantages of Telehealth in Early Intervention

Cole et al, 2019; Yang et al, 2021

- Facilitate family engagement
- Use of modeling and coaching
- Flexibility
- Facilitate parent training
- Improve communication between therapists and families
- Overcome logistical barriers
- Greater access to providers

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Positive Support for Families



- Families apply intervention strategies in the real world and assess the effectiveness of the strategies in real time
- Cultural humility is critical and there is a need for the OTP to clearly embody the role as a service provider
- OTP able to adjust intervention in real time seeing how it fits with the home environment

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Advantages of Telehealth – Words from our Families

- “When the pandemic hit, if we didn’t have telehealth, my son wouldn’t have gotten any therapy services, and I can’t even imagine that. Using Facetime and Zoom allowed us to continue to meet each week”
- “Even though I’m not the therapist, I got so see what I should do and I could show the therapist what I was doing to see if it was right”
- “We got to meet during times that were not “regular hours” but are extremely challenging for my child, like bath time, and this was easy to do because of telehealth”
- “I live way out in the country, and it is often difficult for therapist to travel this far. This way I get services for my daughter”
- “Telehealth was very helpful for my daughter because it kept us in the routine of weekly visits, which she looked forward to”
- “The combination of coaching and telehealth let you [OT] see the real world of my child in our home”
- Coaching and telehealth helped me be a better parent because I needed to help my child

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Attitudes towards Telehealth

- Emerging research suggesting that telehealth may be equally effective as in-person services (Ellison et al, 2021; Kronberg et al, 2021)
- Research reports that families have positive perceptions of telehealth (Pickard et al, 2016)



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Telehealth can support family habits and routines within the community

- Identifies unique community supports
- Provides connections with community to enhance the family capacity



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Positive Supports for Families in Community



- Parents Helping Parents
- Family support groups for children with various diagnoses
- Connections to inclusive community events and activities
- Social connections within the community for parental support and peer interaction

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Enhancing Family Routines and Habits within Community



- Identifying the interest of community interaction for the family
Consider extended family; religious practices; social groups
- Locating supports that fit within the family routines and habits
Engaging family in searching for options within the community considering the family routines and habits
- Solution-focused strategies to enhance success in the community
Partnering with the family to search for options

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Community Connections as Supports for Family

- Honors family decision making process
- Identifies opportunities for community engagement that fits the family context



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Routines of daily life provide the structure and orientation for engagement whether time, place or person

The positive family routines provide a "signature" of the family within the social and cultural environment



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- 1. Identify the key elements in fostering family partnerships to provide authentic family-centered services.
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Questions?

Thank You!

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OTAC 2024 Annual Conference

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