

# Family-Centered Practices in Early Intervention with Young Children with Disabilities or Delays

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# Purpose

- Provide a brief history of family-centered practices and why this approach reached the forefront of early childhood intervention in the mid to late 1980s
- Describe and illustrate the key characteristics of capacity-building family-centered practices
- Summarize findings from different types of studies of the relationships between family-centered practices and parent and child behavior and functioning

# Origins of Family-Centered Practices

- The term family-centered was first used in social work and medicine in the 1950s to refer to a type of client-centered approach to improving patient and family outcomes
- Early Schaefer (1969) first used the term in early childhood intervention to refer to a focus on both child and parent involvement in early intervention practices
- Urie Bronfenbrenner (1974) used the term family-centered to call for a shift in focus from a child-centered to family systems approach to early childhood intervention

# Foundations of Family-Centered Practices

- Contemporary definitions and descriptions of family-centered practices are grounded in belief and value statements for how professionals should interact with, treat, and involve families in their children's care
- Center on Human Policy. (1986). *A statement in support of families and their children*. Syracuse, NY: Division of Special Education and Rehabilitation, School of Education, Syracuse University
- Family Resource Coalition. (1987). *What are the assumptions of the Family Resource Movement?* Chicago: Author
- Koope, C. E. (1981). *Surgeon General's report on children with special health care needs*. Washington, DC: U.S. Public Health Service
- Shelton, T. L., Jeppson, E. S., & Johnson, B. H. (1987). *Family-centered care for children with special health care needs*. Bethesda, MD: Association for the Care of Children's Health

# Examples of Family-Centered Guiding Principles

- Families and family members are treated with dignity and respect at all times.
- Staff are sensitive, knowledgeable, and responsive to family, cultural, ethnic, and socio-economic diversity.
- Family choice and decision-making occur at all levels of participation in the program.
- Information necessary for families to make informed choices is shared in a sensitive, complete, and unbiased manner.
- Practices are based on family-identified desires, priorities, and preferences.
- Staff provide supports, resources, and services to families in a flexible, responsive, and individualized manner.
- A broad range of informal, community, and formal supports and resources are used for achieving family-identified outcomes.
- Staff build on child, parent and family strengths, assets, and interests as the primary way of strengthening family functioning.
- Staff-family relationships are characterized by partnerships and collaboration based on mutual trust, respect, and problem solving.
- Staff use help giving practices that support and strengthen family functioning.

## Two Types of Family-Centered Practices

Research that my colleagues and I have conducted has consistently found that there are two distinct types of practices that constitute subcategories of capacity-building family-centered practices:

- Relational family-centered practices
- Participatory family-centered practices

# Examples of Family-Centered Practices Items

- Staff offer help or advice in response to my family's needs
- Staff provide me information about resources available to families
- Staff respect our family's beliefs, values, and customs
- Staff recognize and acknowledge the good things I do as a parent
- Staff provide me information I need to make good decisions
- Staff work with me to accomplish my family's goals and priorities
- Staff support decisions I make for myself and my child
- Staff are responsive to my family's changing situation

# Description of Family-Centered Practices

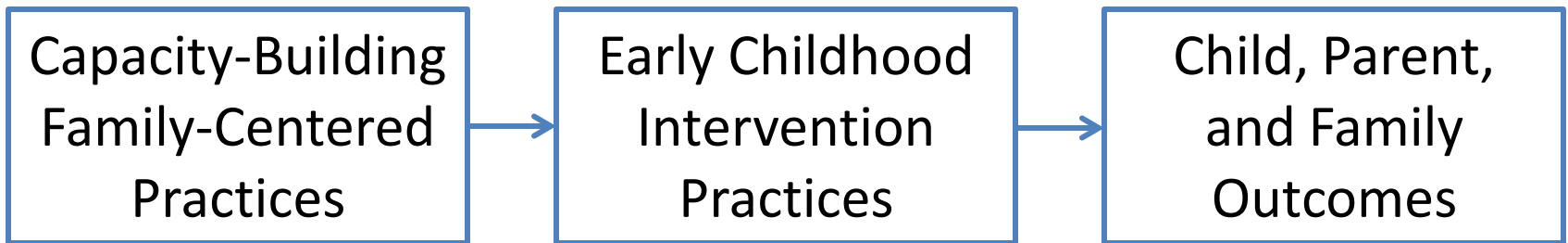
- Family-centered practices are a particular type of help giving style which builds cooperative relationships between parents, other family members, and practitioners that explicitly focuses on family capacity-building as the way in which support, resources, and services are provided or procured.
- Family-centered practices treat families with dignity and respect; provide family members with information needed to make informed decisions and choices; and actively involve families in obtaining resources and supports.



# Family-Centered Practices and Early Childhood Intervention

- Any type of intervention practice (early intervention, education, therapy, medicine, etc.) can be delivered in a family-centered manner.
- Family-centered practices are not a substitute for other types of interventions, but rather are how other types of interventions are delivered.

# Influences of Family-Centered Practices on Child, Parent, and Family Outcomes



# Opportunities to Use Family-Centered Practices

- Any and all opportunities to interact with parents, whether face-to-face or by phone calls, e-mails, or other means, are opportunities to use family-centered practices.
- My colleagues and I have used family-centered practices in home, classroom, and clinic settings and have found that it is possible to use this approach to help giving in any type of setting.

## Relational Family-Centered Practices

- Relational practices include behavior typically associated with effective clinical practice, including, but not limited to, compassion, active and reflective listening, empathy, and effective communication.
- Relational practices also include practitioner beliefs and attitudes about family and cultural strengths, values, and attitudes, and practitioner sensitivity to these beliefs and values as part of intervention practices.

# Family-Centered and Non-Family-Centered Relational Practices

- ***Family-Centered Practices***

Taking the time to explain a child's disability in language that parents can understand and providing the parents opportunities to ask questions to clarify their understanding.

- ***Non-Family-Centered Practices***

Explaining a child's disability using professional jargon and not asking if the parents understand their child's condition.

# Participatory Family-Centered Practices

- Participatory practices include behavior that actively involves family members in (a) informed choice and decision making and (b) using existing strengths and abilities as well as developing new capabilities needed to obtain resources, supports, and services.
- Participatory practices also include practitioner responsiveness to and flexibility in how help is provided to children and their families.

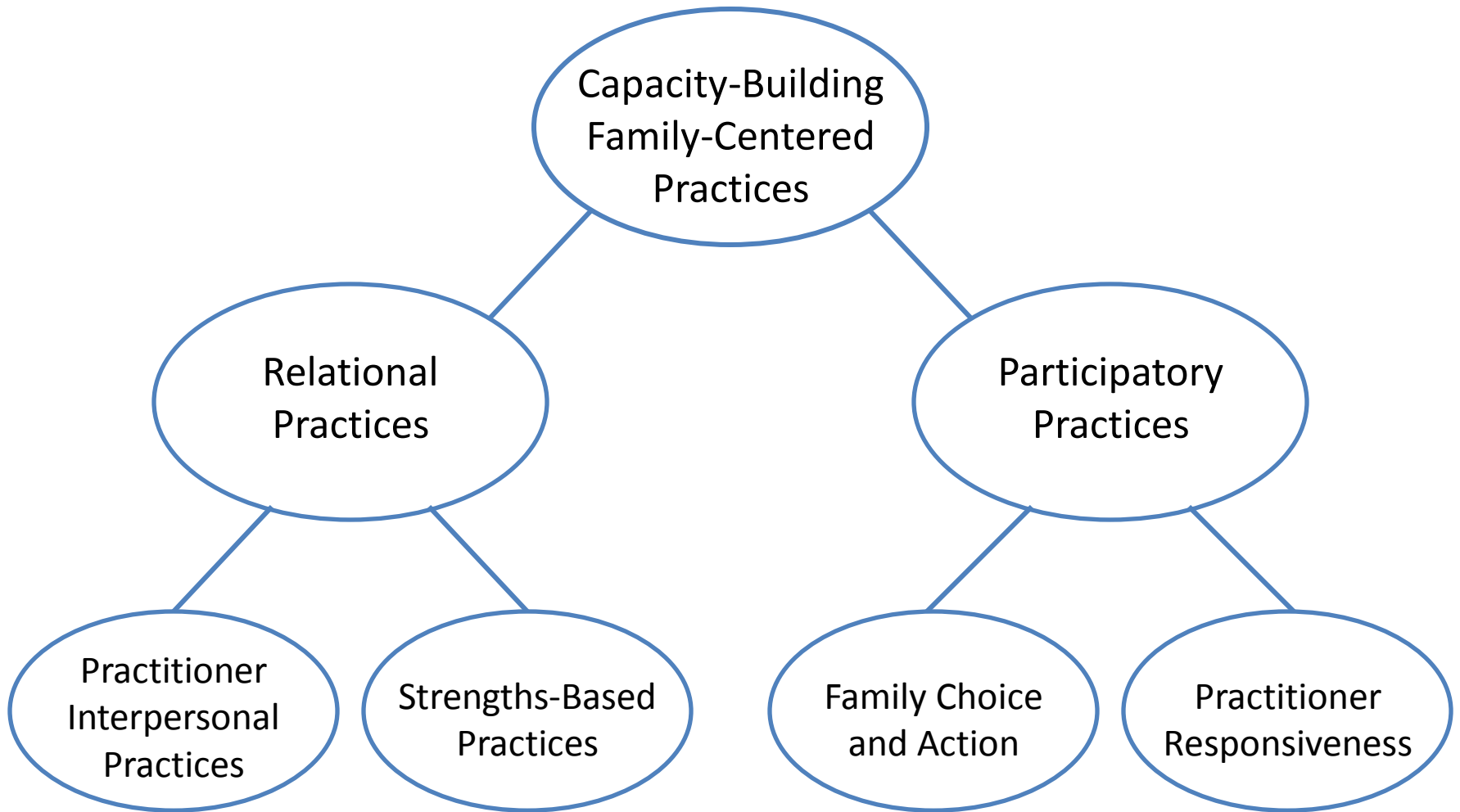
# Family-Centered and Non-Family-Centered Participatory Practices

- ***Family-Centered Practices***

Providing parents options for obtaining additional information about their child's disability and supporting choices that make the most sense to the family.

- ***Non-Family-Centered Practices***

Prescribing solutions to the parents' concerns without evaluating whether the solutions make sense to the family.



## Types and Clusters of Capacity-Building Family-Centered Practices



# Research on the Relationships Between Capacity-Building Family-Centered Practices and Parent, Family, and Child Behavioral Functioning

My colleagues and I, as well as other researchers, have been investigating the manner in which family-centered practices are related to parent, family, and child outcomes for more than 30 years. This research has involved the use of different research methodologies for investigating the influences of family-centered practices on parent, family, and child outcomes.

- Basic research studies
- Structural equation modeling investigations
- Meta-analyses of family-centered practices research studies
- Meta-analytic structural equation modeling studies

# Meta-Analyses of Family-Centered Practices Research

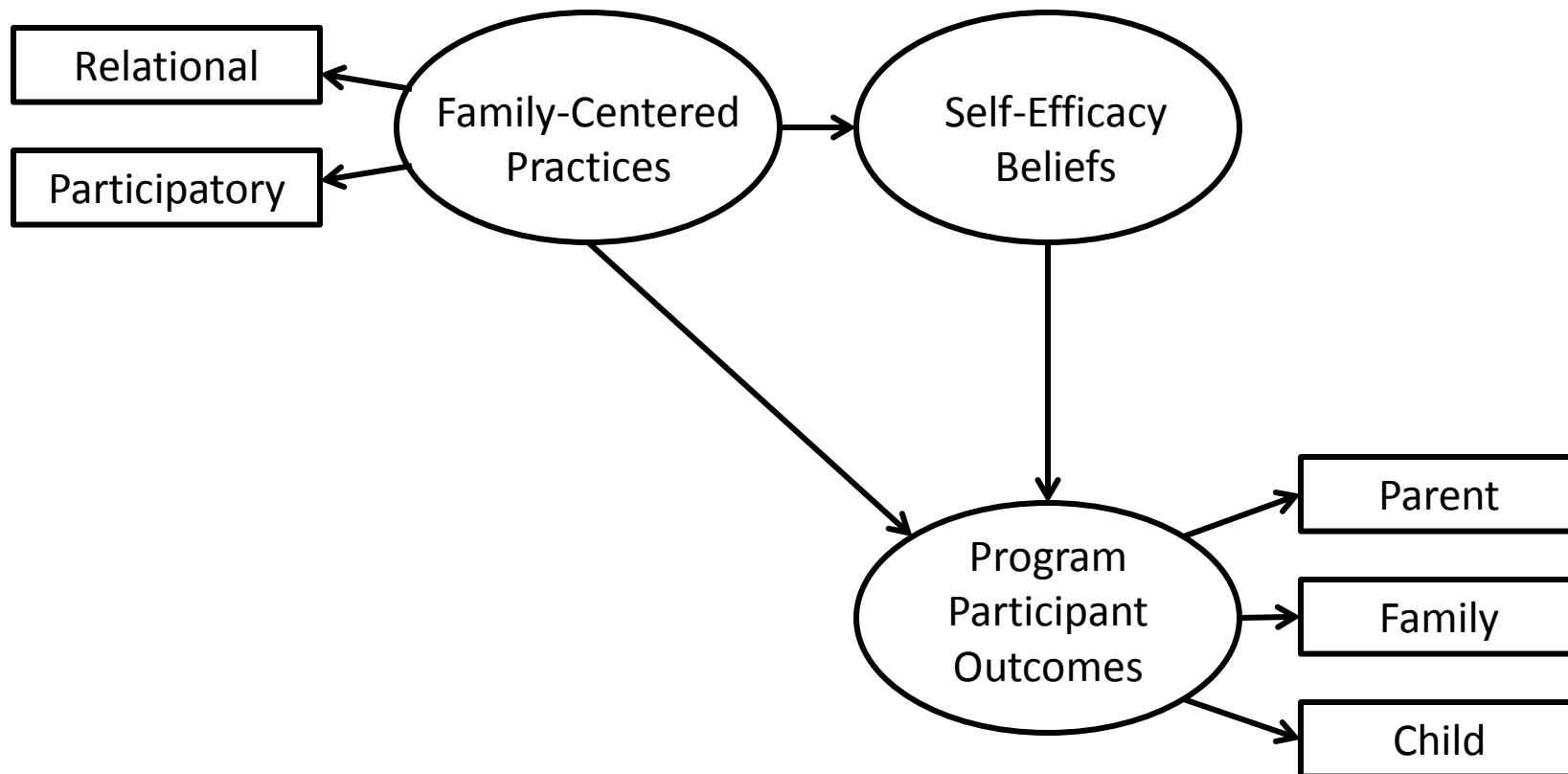
Assess the extent to and manner in which the use of family-centered practices is directly and indirectly related to (a) parent involvement in their children's learning and early education, (b) parenting confidence and competence, (c) parent and family well-being, and (d) child behavior and development ***mediated by parents' self-efficacy beliefs***

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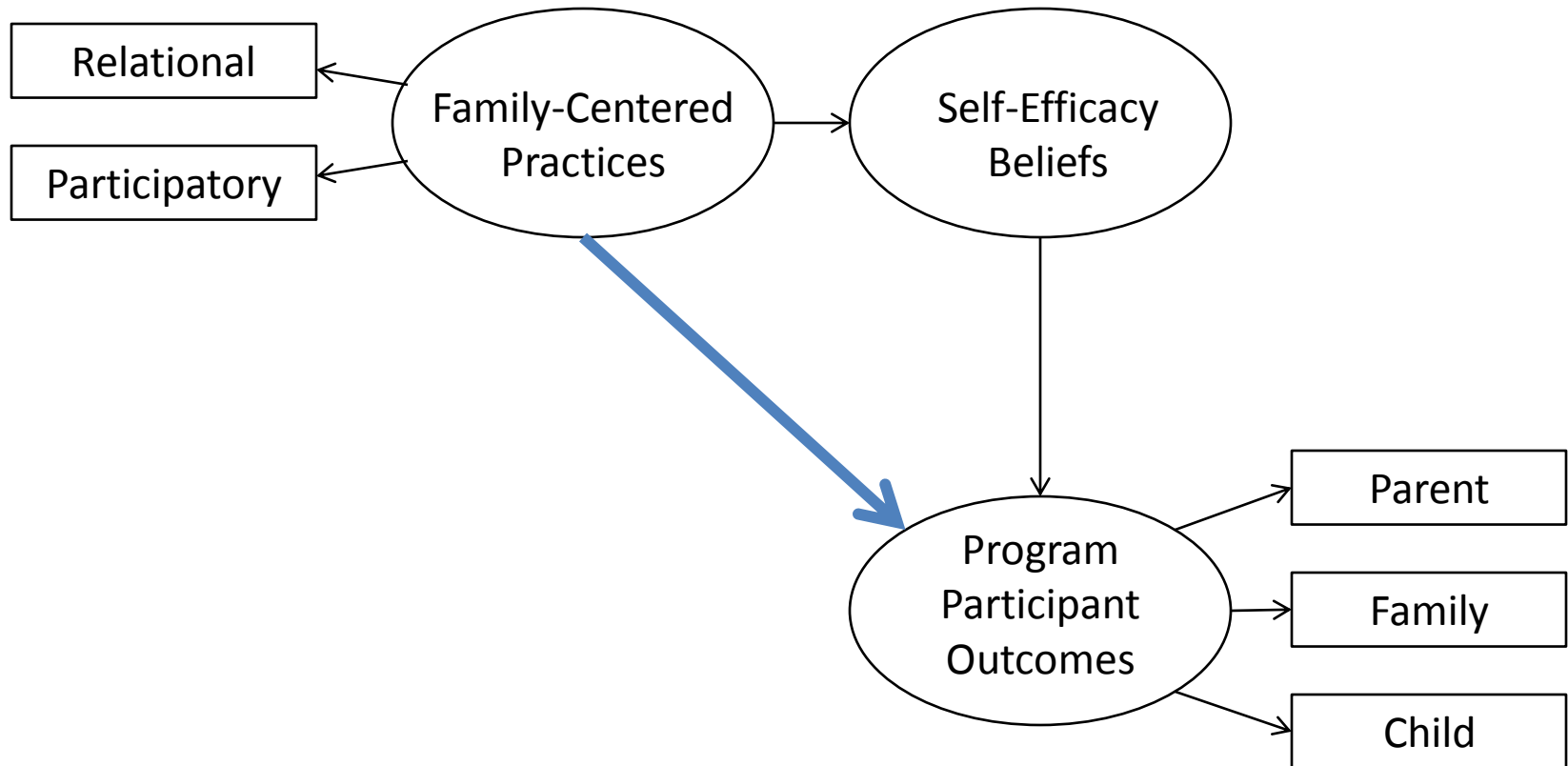
Dunst, C.J., Trivette, C.M., & Hamby, D.W. (2007). Meta-analysis of family-centered helping practices research. *Mental Retardation and Developmental Disabilities Research Reviews*, 13, 370-378.

Dunst, C.J., Trivette, C.M., & Hamby, D.W. (2008). *Research synthesis and meta-analysis of studies of family centered practices*. Asheville, NC: Winterberry Press.

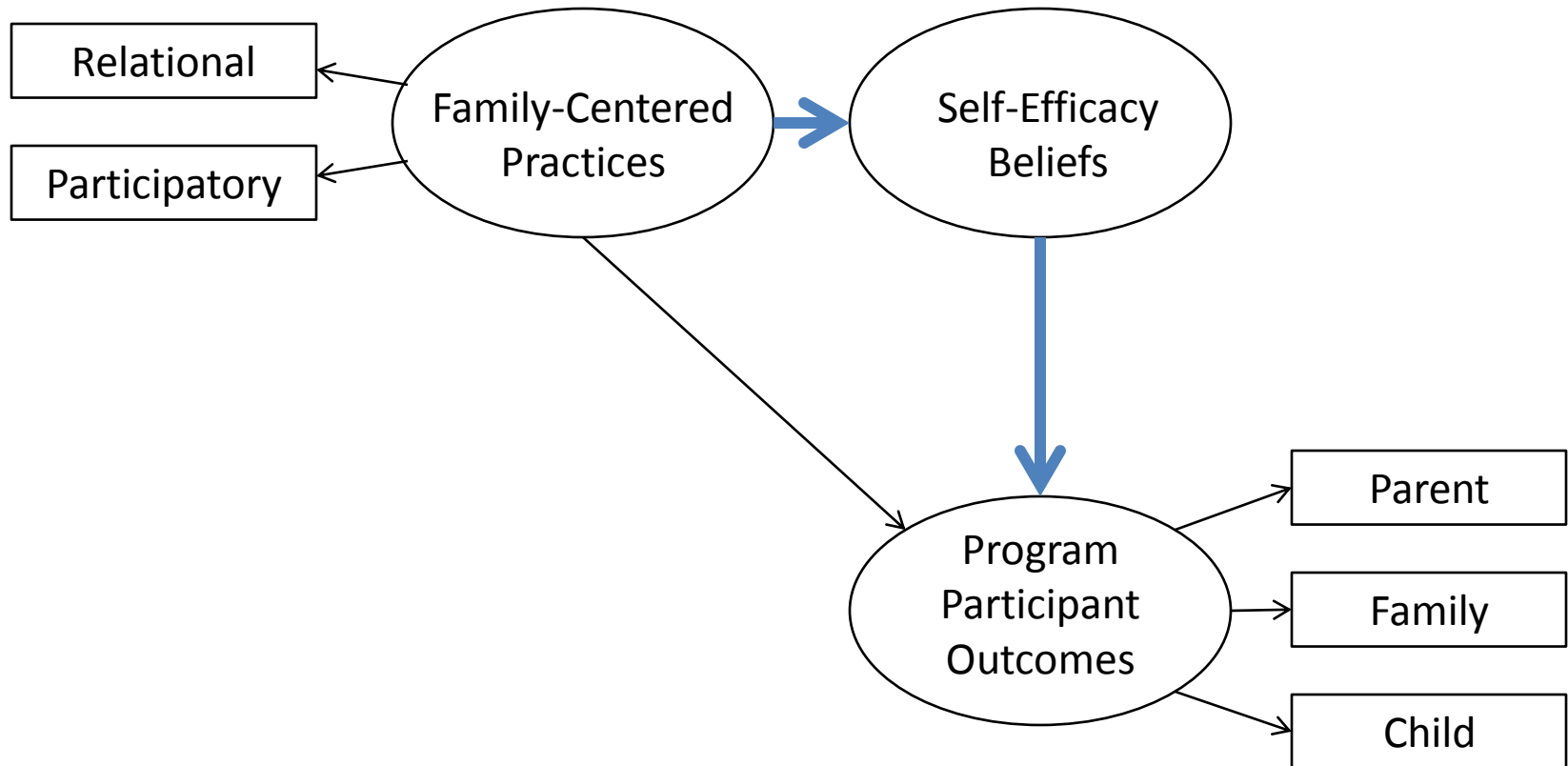
# Framework for Investigating the Influences of Family-Centered Practices on Parent, Family, and Child Outcomes

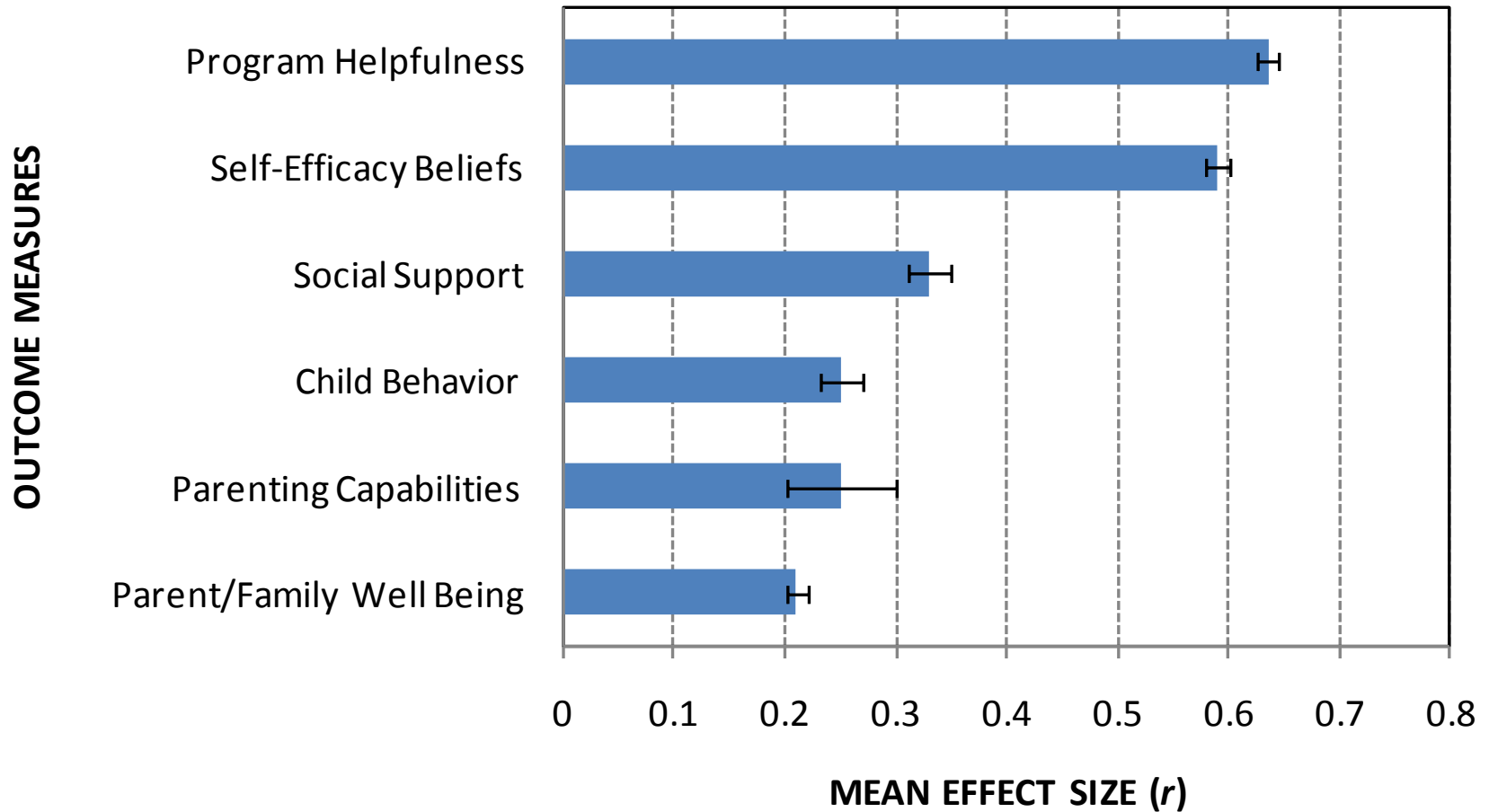


# Direct Effects of Family-Centered Practices On Parent, Family, and Child Outcomes

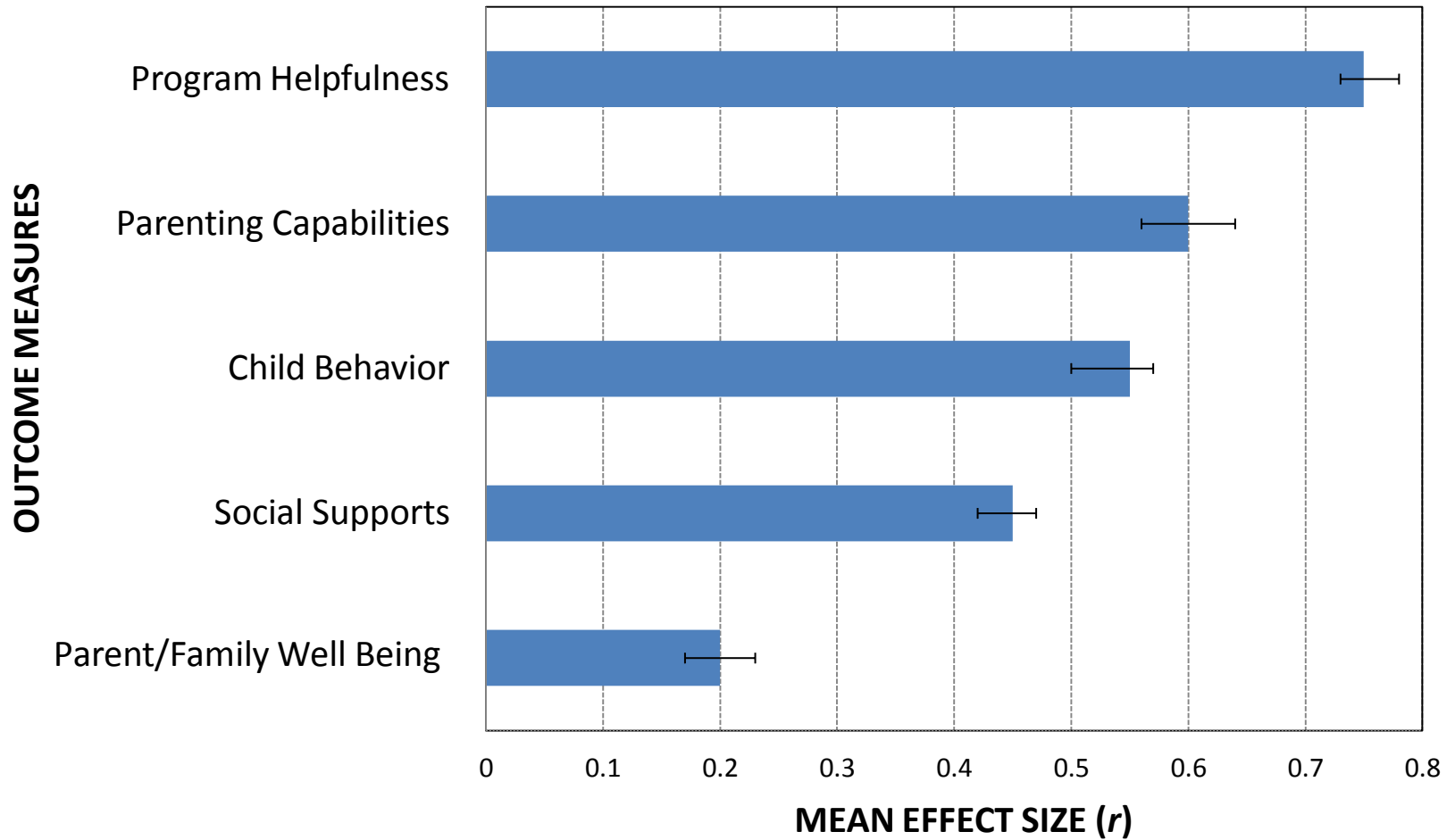


# Indirect Effects of Family-Centered Practices On Parent, Family, and Child Outcomes





## Direct Effects of Family-Centered Practices on Parent, Family, and Child Behavior and Functioning



## Direct Effects of Self-Efficacy Beliefs on Parent, Family, and Child Behavior and Functioning

# Mediated Effects of Family-Centered Practices

One result that has consistently been found in our family-centered research is that the effects of family-centered practices on parent, family, and child outcomes are mediated by self-efficacy beliefs. This is illustrated with the findings from a study of the influences of family-centered practices on parenting competence and confidence in a sample of infants, toddlers, and preschoolers and their parents involved in family resource programs.



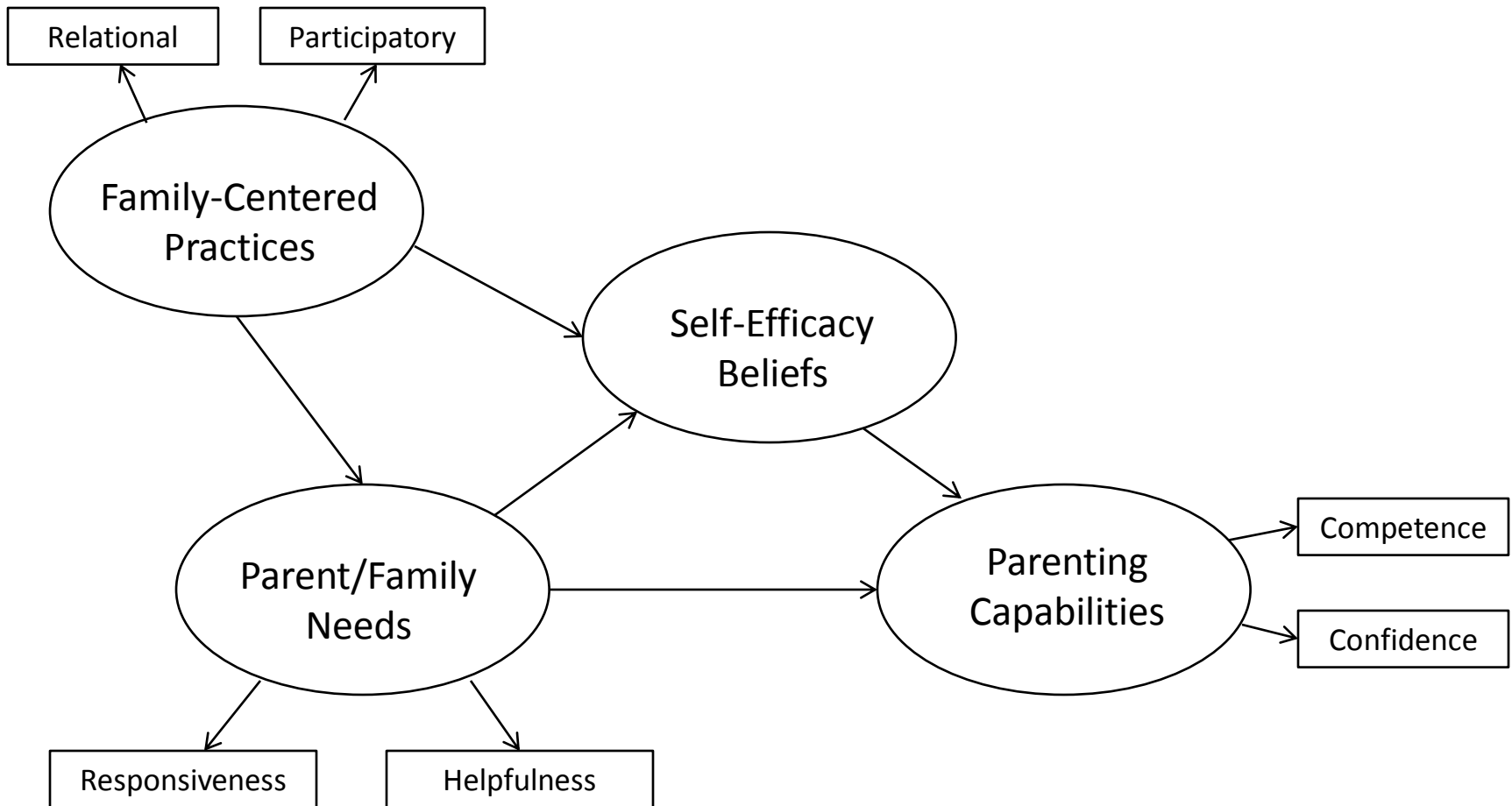
# Evaluating the Indirect Influences of Family-Centered Practices on Parenting Behavior

Participants: 100 parents of young children with and without disabilities participating in community-based family resource programs

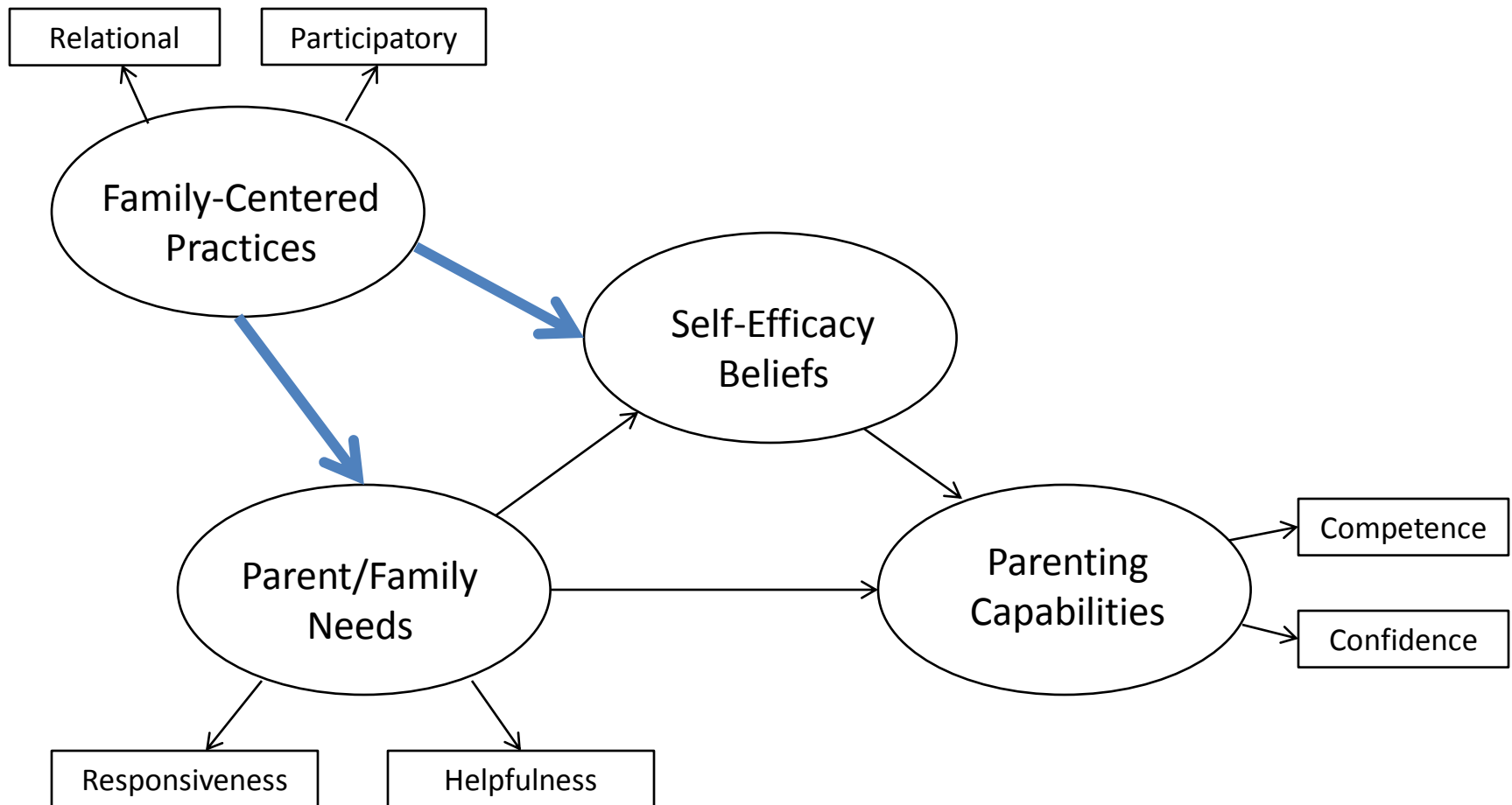
Measures: Relational and participatory help giving, practitioner responsiveness to family concerns, parents' judgments of the helpfulness of practitioner advice and guidance, parent self-efficacy beliefs, and parenting competence and confidence

Method of Analysis: Structural equation modeling for testing the hypothesized relationships among the variables in the model

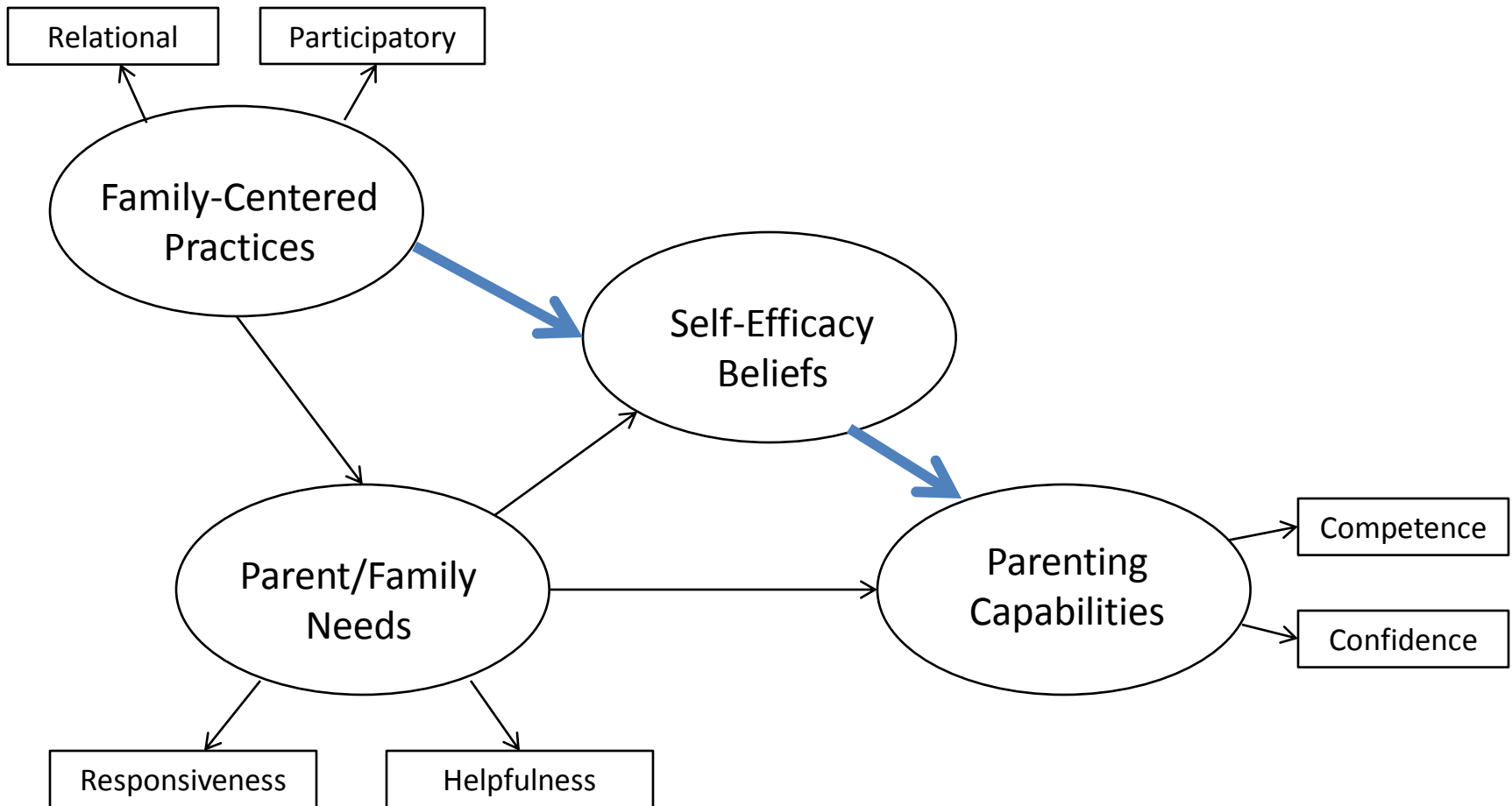
# Direct and Indirect Effects of Family-Centered Practices on Parenting Competence and Confidence



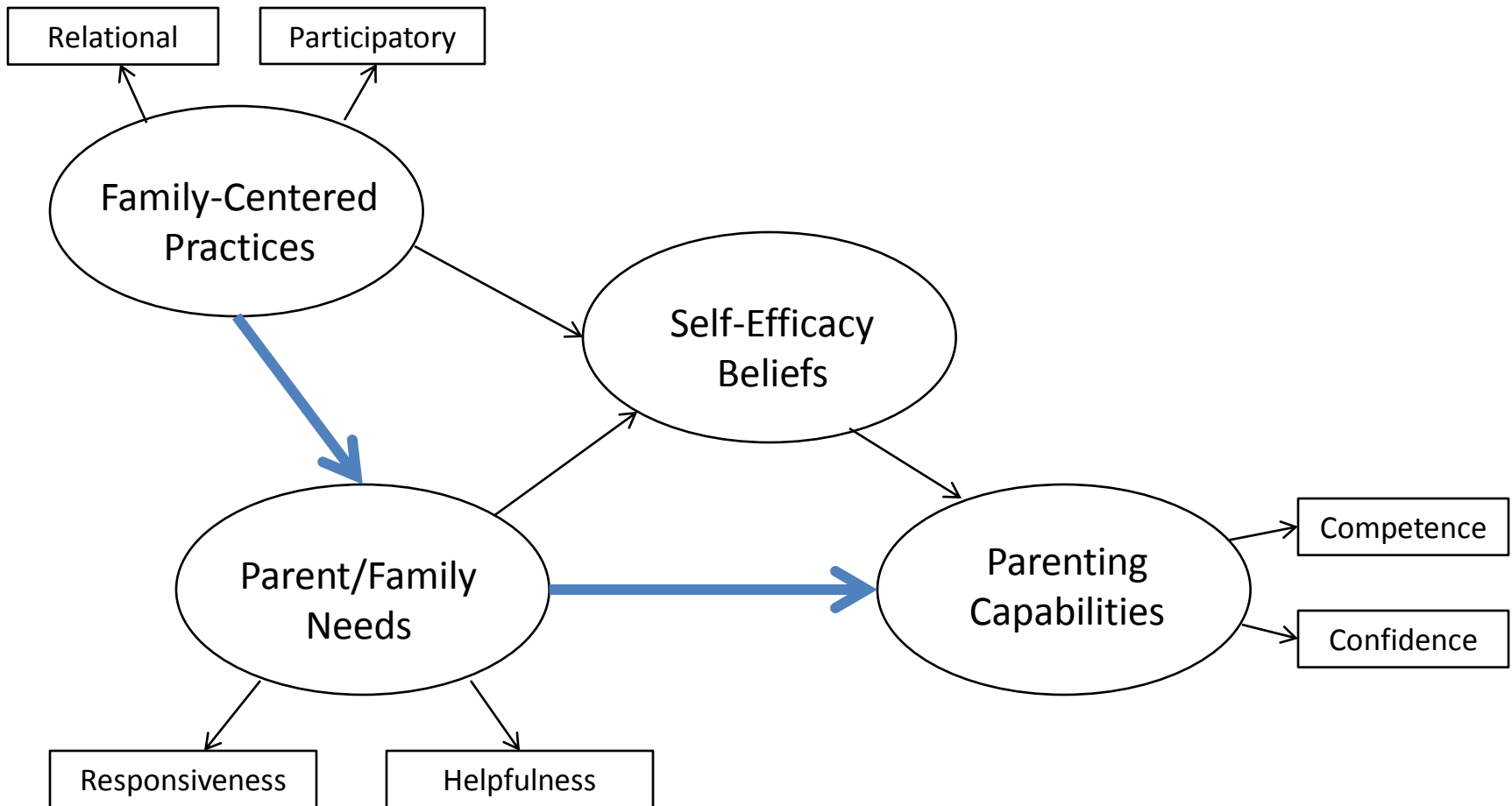
# Direct Effects of Family-Centered Practices on Parents' Judgment of Practitioners' Responsiveness and Parents' Self-Efficacy Beliefs



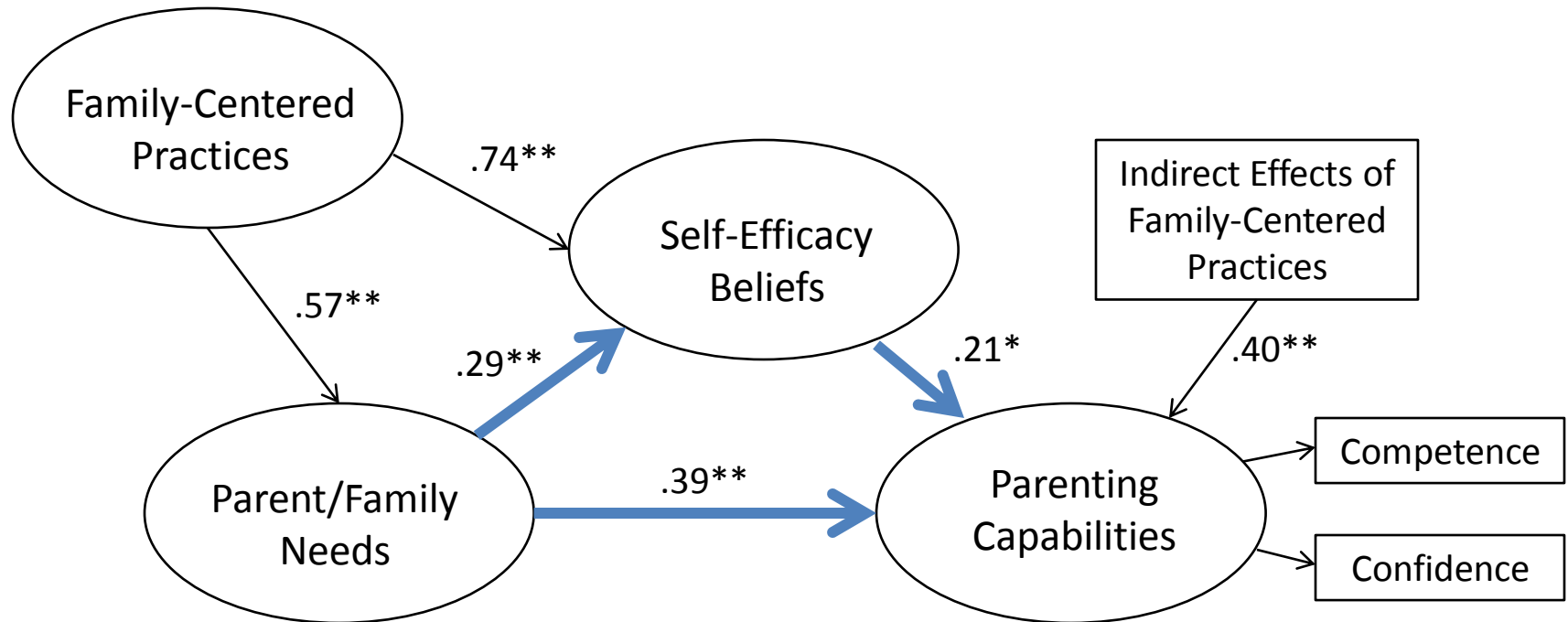
# Indirect Effects of Family-Centered Practices on Parenting Capabilities Mediated by Parents' Self-Efficacy Beliefs



# Indirect Effects of Family-Centered Practices on Parenting Capabilities Mediated by Practitioners' Responsiveness



# Indirect Effects of Family-Centered Practices On Parenting Confidence and Competence



\* $p < .05$  \*\*  $p < .001$ .

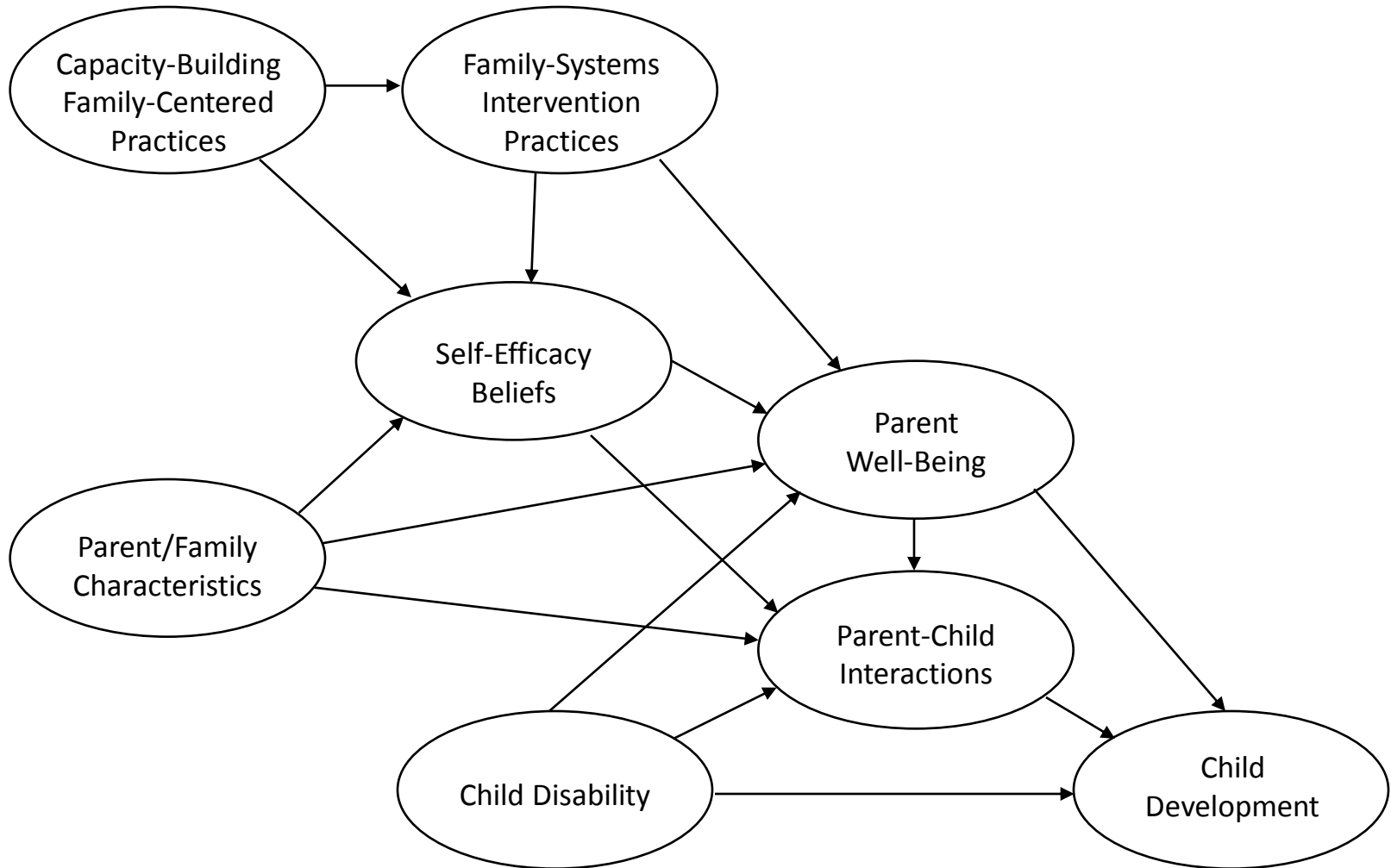
# Meta-Analytic Structural Equation Modeling Research Synthesis

- Studies:* Eight studies that included measures allowing us to trace the effects of capacity-building family-centered practices and family-systems intervention practices on parent-child interactions and child development
- Sample:* 910 infants, toddlers, and preschoolers and their parents involved in different kinds of early childhood intervention and family support programs
- Hypothesis:* The influences of family-centered and family-systems intervention practices on parent-child interactions and child development would be indirect and mediated by both self-efficacy beliefs and parent well-being

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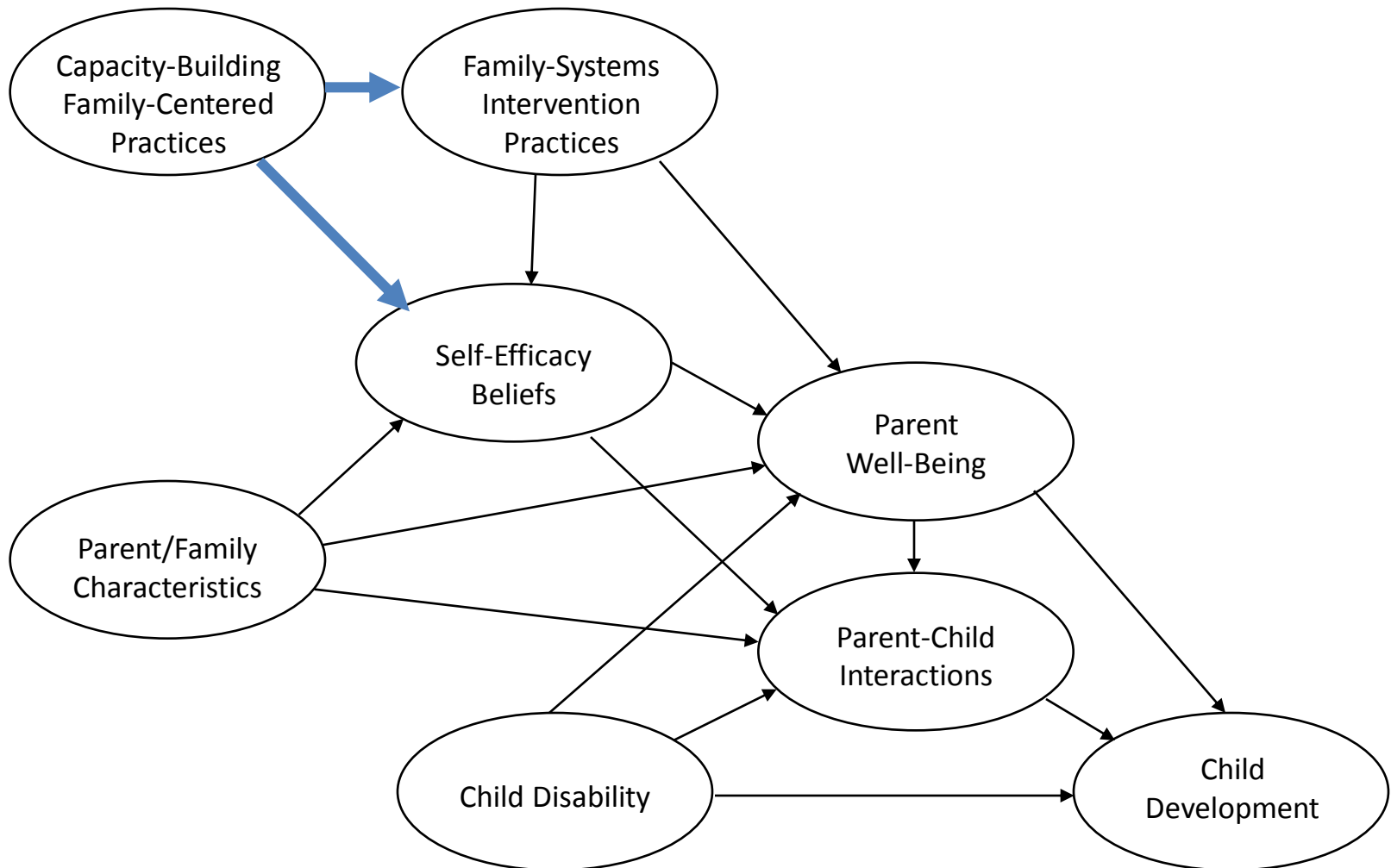
Trivette, C.M., Dunst, C.J., & Hamby, D.W. (2010). Influences of family-systems intervention practices on parent-child interactions and child development. *Topics in Early Childhood Special Education*, 2010, 30, 3-19.

# Model for Assessing the Direct and Indirect Effects of Family-Centered Practices on Parent, Parent-Child Interactions, and Child Behavior and Development

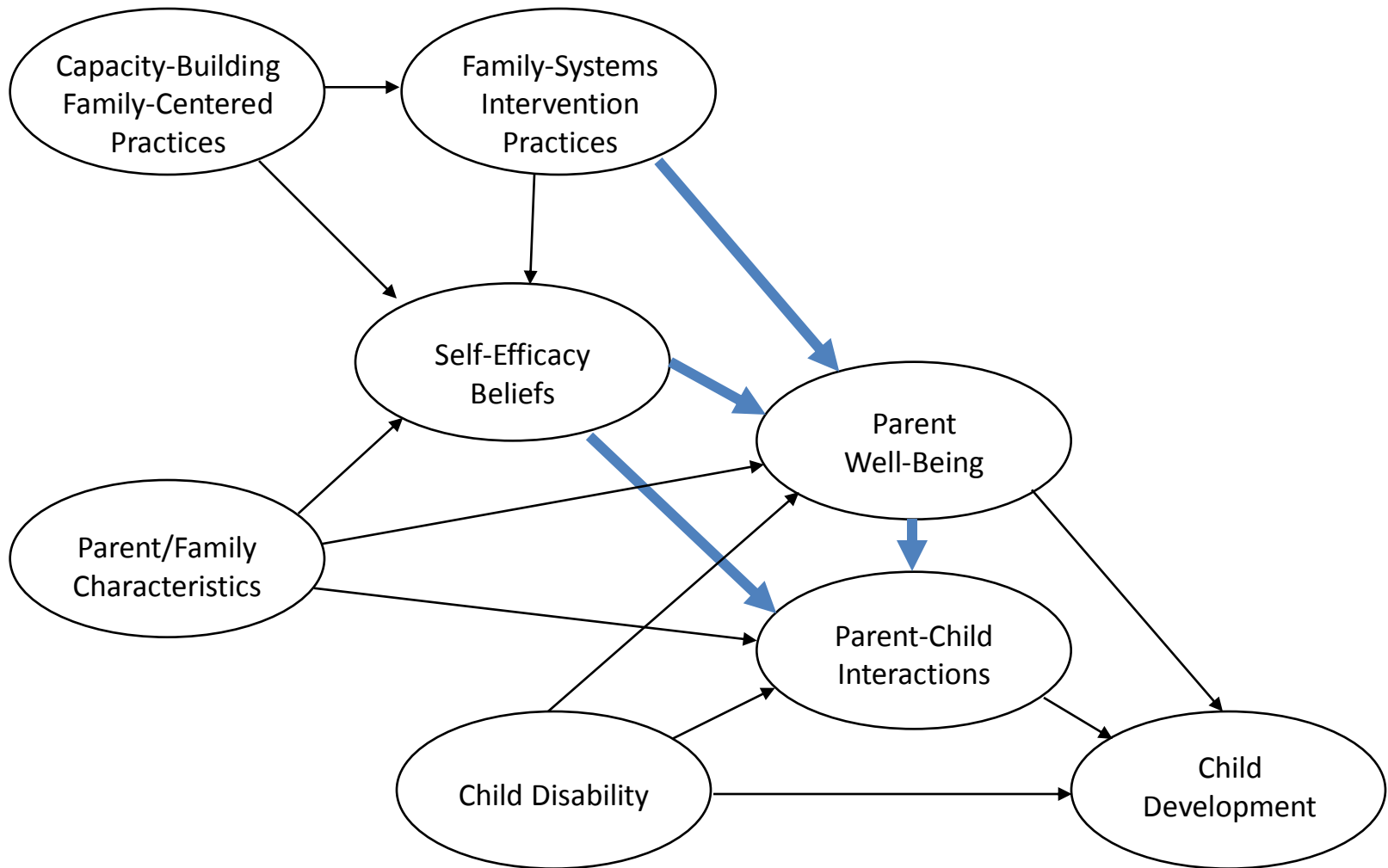




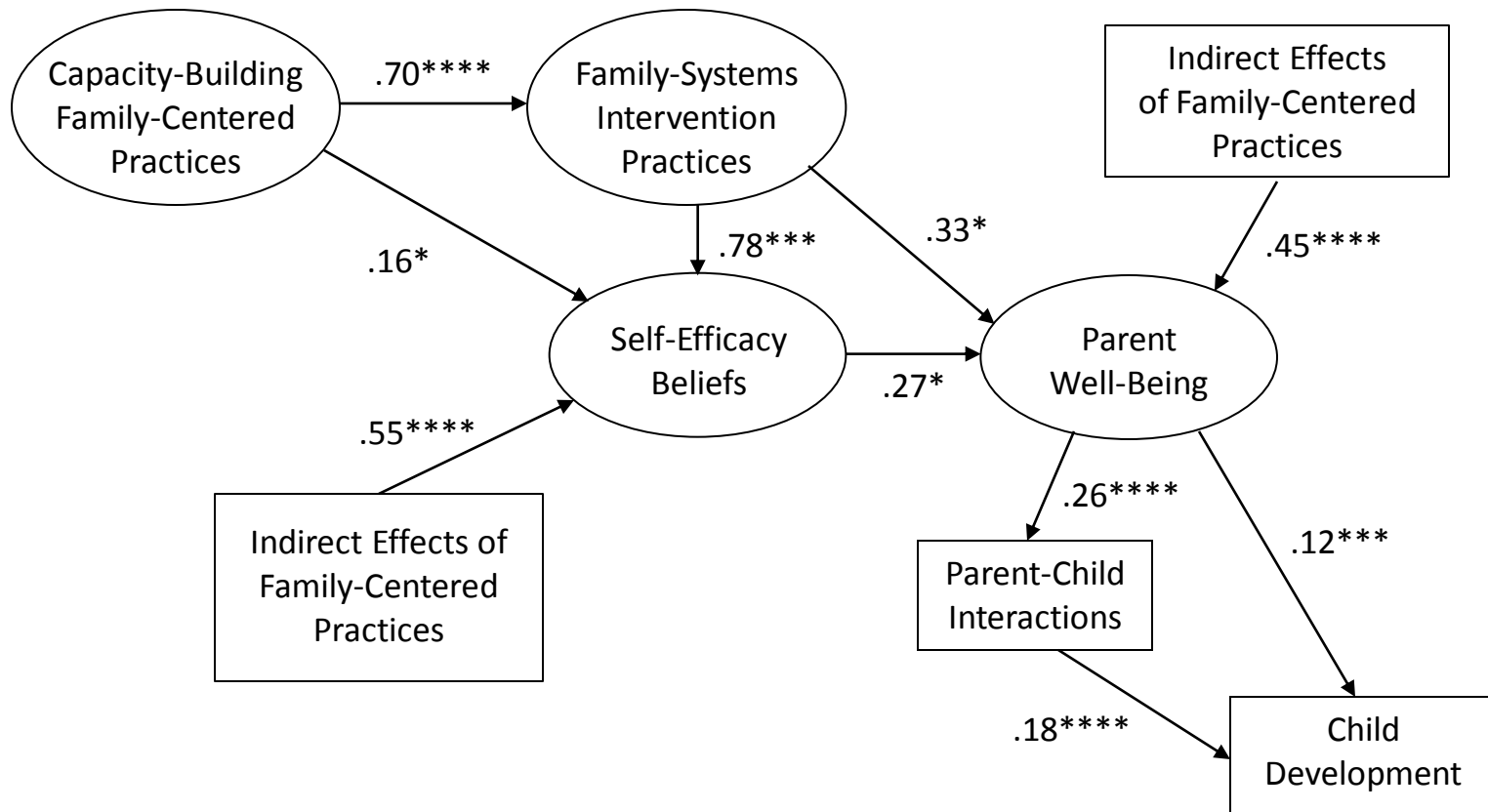
# Direct Effects of Family-Centered Practices on Parent, Parent-Child Interactions, and Child Behavior and Development



# Indirect Effects of Family-Centered Practices on Parent Well-Being, Parent-Child Interactions, and Child Behavior and Development

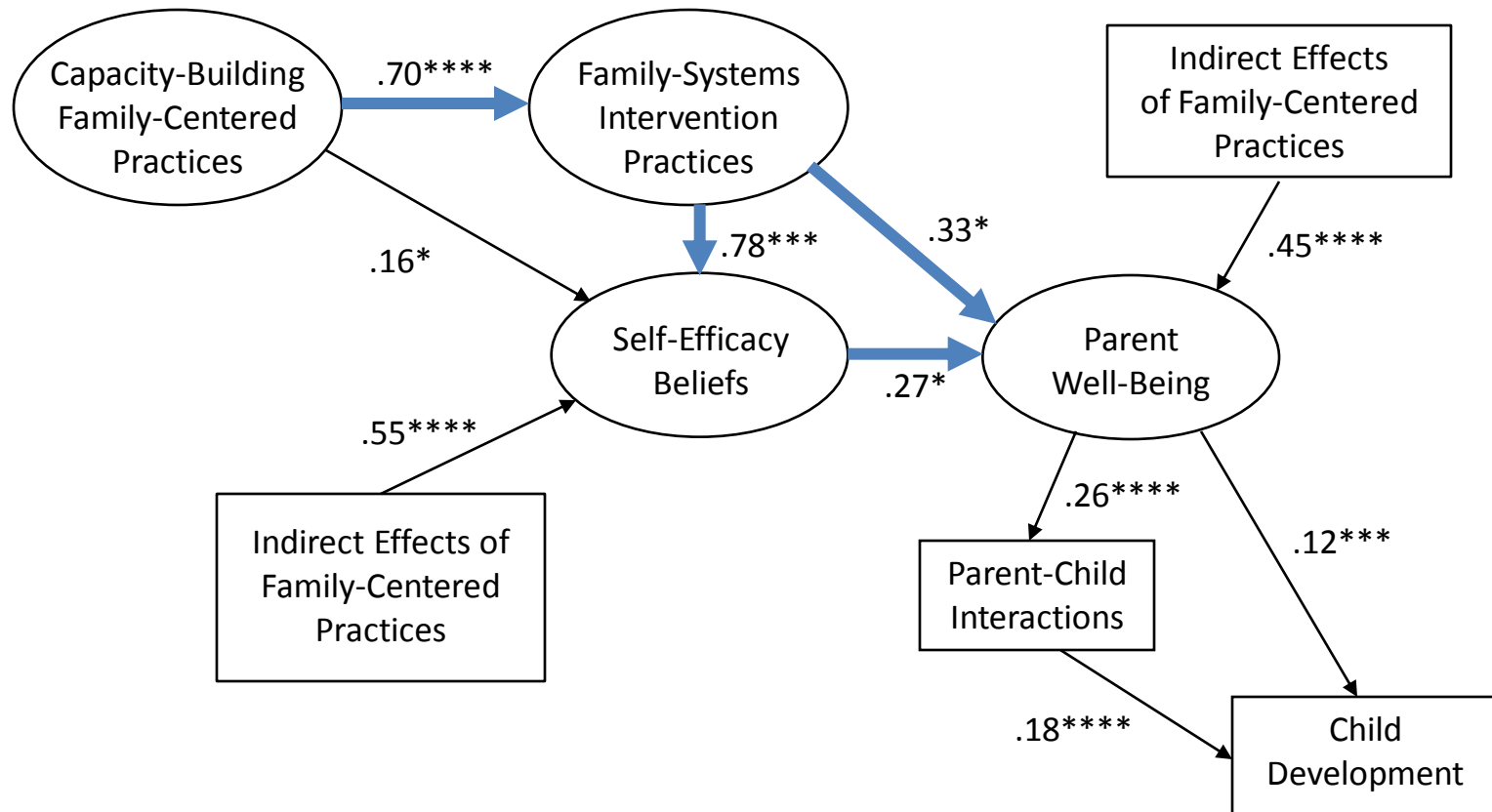


# Meta-Analytic Structural Equation Modeling Results



\*  $p < .05$ . \*\*  $p < .01$ . \*\*\*  $p < .001$ . \*\*\*\*  $p < .0001$ .

# Meta-Analytic Structural Equation Modeling Results



\*  $p < .05$ . \*\*  $p < .01$ . \*\*\*  $p < .001$ . \*\*\*\*  $p < .0001$ .