

Webinar C6: Partnering with Families Who Are Coping with Adversity
Track C – Family and Community Partnerships
17th Annual Virtual Birth to Three Institute

Presenter: Good day, and welcome to the virtual Birth to Three Institute Partnering with Families Who Are Coping with Adversity conference call. Today's conference is being recorded. At this time, I would like to turn the conference over to Kelly Claire. Please go ahead, sir.

Kelly Claire: Hello, everyone, and welcome to today's conference. Before we get started, I'd want to go over a few housekeeping items. If you have questions or – that you need to ask for today's conference, please look to the lower left, click the private tab, and choose leaders and assistants.

All questions will be sent to everyone in the conference today, the leaders and assistants, and we'll be able to answer your questions there. We will have a question answer session at the end, but please don't wait to put those questions in, get them in as you think of them, and we will take care of those at the end.

We will not be using the hand raised button for today's session up in the top, so please, if you have any questions or have any technical – need any technical assistance, please use the private tab and leaders and assistants. With that I would like to turn it over to Victoria. Victoria, go ahead.

Victoria Prieto: Hello, and thank you for joining us. My name is Victoria Prieto, and on behalf of the Early Head Start National Resource Center, I'd like to welcome you to the webinar today, Partnering with Families Who Are Coping with Adversity. The EHSNRC brings this webinar to you as part of this year's virtual Birth to Three Institute.

If you are joining us today for the first time, the format of this webinar is as follows, it is 90 minutes long, and you'll be given opportunities for participation throughout the webinar, and at the end of the presentation you will be able to send your – your questions, as well.

I am joined today by Liz Lujan and Bruno Anthony to talk about this important topic, how to partner with families in a way that builds resilience and helps them and their children cope. Liz and Bruno, we're pleased to have you with us today. Liz, would you like to get us started and tell us a little bit about yourself?

Elizabeth Lujan: Thank you, Victoria. I am happy to be here and what brings me here today is my commitment to working with vulnerable families as an infant mental health therapist. And my hope today is that by sharing what has helped me in the work may be useful to others.

Victoria Prieto: Thank you, Liz. I'm going to turn to you, Bruno, to introduce yourself and then take us right into the topic we will be discussing today.

Bruno Anthony: I am a Developmental and Clinical Psychologist, and Professor of Pediatrics and Psychiatry at the Center for Child and Human Development at Georgetown University. Now, I've been working in early childhood for many years, probably too many to count, beginning when I actually assisted my mom, who was a wonderful preschool teacher, and learned a lot from her. But most recently, I've been providing consultation on behavioral and emotional issues to Head Start and Early Head Start in Baltimore, and helping providers with difficult issues there.

So throughout all this time, though, the building of partnerships with families, particularly those facing adversity, has been my passion, so it was really great to be asked to be part of this webinar. Our focus is on building partnerships with families, particularly those who are coping with adversity and stressful situations. And we believe strongly, and I think the research really does support the idea that strong partnerships with families can help them build resilience and access resources that will help them cope.

So here are our three goals for today. First, many families face stressful situations, and – and Dr. Lujan will talk about how adversities can be painful for the children of these families and can affect the growth of key social and emotional competencies. Then I will share with you some important factors that help build partnerships with families and to help them deal with adversity.

Then, partnering with families, as you know, makes clear what families – what the family needs are in terms of resources, and so helping match families with those community resources really helps them meet the needs that they have, so our third objective is to talk about how to help families in the programs reach out to the many organizations and services for support. Partnering can be challenging and sometimes stressful, but we think that it can be one of the great opportunities to make a difference in the lives of young children and their families.

So before we start, though, I'd just like to review what the Head Start Performance Standards have to say about partnering. You can see first they focus on partnership building with parents, and it establishes mutual trust and respect by seeking families perspectives, listening to families, identifying family goals and strengths and helping – and – and offering help and support.

Second, this process must be initiated as early after enrollment as possible. And also, building partnerships does not just occur at the beginning of a relationship, but it's an ongoing process. And third, it must take into account consideration of each family's readiness and willingness to participate in the process. Everyone is not in the same place, and we will be emphasizing that throughout this webinar.

So now, let's turn to – learn about how adver – adversity impacts children and their families from Dr. Lujan. Liz?

Elizabeth: Thank you, Bruno. How adversity affects a child's social and emotional development will be our initial focus, and we will begin by reviewing conditions that enhance development, and then discuss

conditions that challenge development. Social skills and emotional competencies are integral to young children's learning and set the stage for success in school and life.

The term social and emotional development refers to development of the capacity of a young child to form close and secure adult and peer relationships, regulation and expression of emotions in socially and culturally appropriate ways, and exploration of the environment and learning, all in the context of family, community and culture. Social and emotional health is the child's developing capacity to trust, relate, take pleasure in self and others, feel effective, and competent, and secure, and confident. As service providers, we have a critical role to help adults in a child's life recognize and nurture the social and emotional milestones of young children in their care.

What you see on these slides are indicators of resilience in children. A definition of resilience is the ability to adapt well to adversity, trauma, tragedy, threats, or even significant sources of stress. Research on resilience in children demonstrates that an essential protective factor for children is the reliable presence of a positive, caring and protective who can help shield their children against adverse experiences. They can be a consistent resource for their children, encouraging them to talk about their experiences, and they can provide reassurance to their children that the adults in their lives are working to keep them safe. This in turn engenders trust in others and the environment. That in turn enhances the confidence to explore and engage with others and in their environment.

Victoria: Thank you, Liz. You have defined resilience as the ability to adapt well to adversity. What comes to mind is the ACE Study, Adverse Childhood Experiences, that Dr. Philippe talked about in his plenary presentation.

The ACE Study shows a powerful relationship between our emotional experiences as children and our adult emotional health, and physical health. We also heard Dr. Philippe explain that time does not heal some of the adverse experiences we find so common in childhood. One doesn't just get over something. And babies and toddlers, as we know, are constantly trying to make sense of their experiences, whether or not those experiences are positive or negative, right?

I once heard a teacher say children share the same problems as adults. There are no small problems, only small people trying to solve the big things they cannot understand. So Liz, before we go back to the topic of resilience and how children adapt or not, could I ask you to talk about the stressors our youngest children face, and how they experience stress? How does it show up?

Elizabeth: Yes, Victoria. When working with families, we need to understand the types of stressors that they are facing in order to be able to identify effective internal, within the family, and community resources that will support their ability to cope. Children experience many different types of stressors throughout their lives. Some stress may be normative and developmentally appropriate. For example, a two-year-old who experiences the birth of a new baby in the family, and may feel stressed by this. The child finds it difficult to learn to share the mother's attention, but will also likely learn coping strategies that benefit him later in life.

Further down the continuum of risk to the child is toxic stress, and this is a strong, frequent and/or prolonged activation of the body stress response system in the absence of the – a buffering protection of stable adult support. The baby or toddler who constantly worries when his parents will fight with one another bears an emotionally costly burden with potentially long-term consequences.

Children exposed to family violence, physical or emotional abuse, extreme poverty, or parental substance use, may experience toxic stress. Toxic stress can lead to physiological changes, such as in brain architecture, that in turn can lead to poor management of stress over time, so the presence of toxic stress in childhood can have long-term effects. At the end of the spectrum of risk, traumatic stress can result when the young child is exposed to an unpredictable event or series of events that overwhelm the ability to cope. It can result in feelings of horror and helplessness.

A traumatic event can be a one-time shock, such as an automobile crash, or a long-term situation, such as domestic violence or sexual abuse. But – but by definition, it is one for which the young child cannot prepare. The event or circumstance is perceived as horrifying because it involves an actual threatened death or serious injury to the child or others, or a threat to the psychological or physical integrity of the child or others. Finally, the event immobilizes the child's coping mechanism and renders him helpless.

These feelings in young children often result in disorganized and agitated behaviors. [...] Scientists are studying what happens to babies who experience toxic stress, stress that overwhelms the baby's developing brain. Under those circumstances, the brain gives off chemicals and inhibits the ability to regulate emotions, and to learn in age-appropriate ways. It also seems to change in some fundamental way the response to stress, reducing the capacity of children to be in a non-stressed state. It is this – these children cannot turn off the stress response.

In the most extreme circumstances, toxic stress actually stifles brain growth, so here one might think of a child in a daycare center who is repeatedly biting others without appearing to be provoked and may be exposed as a result. I am working with such a child currently and her family.

Victoria: Thank you, Liz. I'm really glad you're helping us gain insight into how children experience stress. A lot can happen in those formative years and we all need to be aware of. Let's give our audience a chance to participate, so here we go.

On your screen, you should see a poll question which we would like you to respond to during the next 30 seconds. The question is: what adverse stressor do you find most challenging in your work with families? Child abuse and neglect; substance abuse; domestic violence; depression or mental illness?

I would like to encourage all participants to start sending your responses to the question, what stressor do you find most challenging in your work with families? We are learning that stress affects everyone in the families. It doesn't affect just the parents. So let's see what kind of response we get.

Okay, Kelly, can we see the results? What do we have so far? It seems to me that, let me see, for this question, what adverse stressor do you find most challenging in your work with families, most of our participants have checked depression or mental illness. What can you tell us about that, Liz?

Elizabeth: Yes. One can see that in Felitti's presentation in the slide, the factors that he presented and discussed included mental health issues. When we work with families of – with mental health issues, there's often other issues that we will encounter as well, and mental health – depression is a – is actually a chronic problem in – in the work with vulnerable families.

And it is often presented, as I mentioned, or we encounter it, when working with young children who are perhaps having difficulties in their behavior. Felitti discussed that the cumulative impact of adversities can occur in childhood, and we know that these factors lead to and predict the 10 leading causes of adult death and disability, and these are the factors that are up on – on the slide at this point. Other sources of adversity include poverty.

Children from the lowest – lowest income levels are the least likely to have positive social interactions upon entrance to kindergarten. One in five children enters kindergarten with poor social developmental skills. It's difficult for them to join others in play. They don't have the ability to make and keep friends, and they do not positively interact with their peers.

Immigration stress is another factor. Children born to immigrant parents are a large and rapidly growing segment of the nation's population of children. Most of these children, 93%, are American citizens. Children of immigrants are more likely than children of U.S. born citizens to face economic hardships and significant barriers to healthy social and emotional development. These barriers include exposure to violence, and can affect children's readiness to succeed in school and beyond.

When children's social and emotional health is compromised, it can create significant challenges, leading to failure in school, inability to make and sustain friendships, and negative feelings about themselves. As the adversities and stressors increase, they have a cumulative impact, and the child's well-being – and with time and no intervention and/or adequate protection, resilience is eroded.

Some of the behaviors and difficulties that result include impaired emotional regulation in children. For example, the child that can't stop biting. We find difficulties in the parent-child relationship. For example, a parent and child who trigger each other and are reminders of the trauma. A parent with negative attributions toward the child. Now that child that is biting is bad, and the – and the biting is not recognized as a stress response.

There are negative expectations from children and parents, as well. The idea that you will hurt me, or the thought that, are you really going to help me – comes up. The child internalizes these negative attributions, and views the world as hurtful and dangerous. Parents do as well.

For parents experiencing stress and adversity, their ability to protect their children is often compromised. This in turn places at risk the child's developing ability to cope with stress effectively in the future.

Victoria: Indeed, and early experiences shape future behavior. Liz, you mentioned that one in five children enter kindergarten with poor social skills. Research tells us that the experiences a child has in the first three years of life shape the architecture of his developing brain, and that persistent adversity during those sensitive periods can be detrimental to their social, emotional and physical health. It begs the question, how does adversity impact infant and toddlers ability to learn and be ready for kindergarten? Can you expand on that a little bit?

Elizabeth: Yes. Research tells us that the consequences of these family adversities for infants and toddlers include lowered IQ scores and lower cognitive development scores. Failure to master age-appropriate developmental tasks.

There's increasing evidence of maladaptive social and emotional functioning, and this leads to high risk behaviors in adolescents, and risks that are transmitted to the next generation, such as high levels of mental health problems, depression, posttraumatic stress disorder. This in part is – is – is a process that involves the intergenerational transmission of trauma.

Victoria: Thank you, Liz. This is a really important point for us to understand that early experiences do matter. Shall we move to the next slide?

Elizabeth: "Each baby is born in a unique family that has its own culture and history, its own strengths and its own ways of coping with stress and adversity."

Victoria: That quote summarizes what makes each child unique. Each child is the sum of his family culture, history, and his own strengths. Let me now turn briefly to the question about staff who work directly with families. You know, Liz, in Early Head Start, we have hundreds of home visitors who every single day work directly with families, and feel the families trying moments.

I think of their own stress. Our home visitors do a lot of heavy lifting each day, and then they go home to their own families. They are my heroes for sure. These are trained home visitors, Liz, and I'm wondering if you could share some words of wisdom for our home visitors when they work with families facing multiple adversities.

Elizabeth: A question that we can begin with in order to process some of these experiences with families is to ask ourselves, how does this affect me? Do we have the space and time to attempt to identify the emotions that have been evoked in us during these interactions with the family, or a child in distress? How do we cope and manage the impact of family strain when working with multiple families facing these circumstances?

Do we know what regenerates our ability to hold onto hope and instill hope in our work, and relationships with families and children? What brings us back to meet them with empathy and respect the following weeks?

Victoria: I love what you just said, Liz. Time and again we hear about teachers, home visitors, child care providers doing heroic things for the children and families in the program. For me personally, the concept of hope goes beyond optimism. Hope makes me think of the inner certainty that what programs do for families makes sense, absolute sense.

Bruno, I'm wondering if you could help us think about the many ways to partner with families to support and build on their strengths as they find their way through multiple challenges.

Bruno: Yes, Victoria, thanks. So we're not going to – we're going to talk about ways to build partnerships and families, but really based on their strengths. But before I do, what I – I want to find out your ideas about partnerships. What we'd like you to do is take a moment to think about this question, which is in the slide. What words come to mind that describe the significant partnerships that you have had in your life?

Now if you would, type some of those words that come to mind in the chat box on the lower left of your screen, and then I'll take a look at them as we – as we – as they come in and – and let people know kind of what – what you're thinking about. So as I do, you know, we have relationships with many people in our lives, such as family, friends and neighbors. However, we do not always develop partnerships with them.

For me, relationships turn into partnerships when the people involved share a common goal, being equal, contributing in different ways, value, respect, trust, shared decisions. Those are some of the things that I think about. So I'd be glad if you could type some of those things in – your thoughts into the chat box on the lower left-hand of your screen.

Victoria: I see that our participants are saying that what comes to mind is a feeling of comfort, love, support, connection, collaboration, reciprocal relationships, working together for a common goal, and being nonjudgmental, among others. Bruno?

Bruno: And many of those things are – we want to keep in mind because I think as we go through, you have really captured a lot of the ideas that make for strong and effective partnerships. So what I'm going to do now is go through some of those ideas, and I'm going to start with a few – we're going to start with a few of the challenges, because I think those are always difficult to – to deal with.

So first of all, it could be that there are conflicting belief systems between you and families and attitudes. Everyone has a unique background that is shaped by family cultural experiences, education, work. Each of these factors influences who we are, and the beliefs that we hold about ourselves and others, and so your beliefs influence your work, and sometimes they may conflict with the family.

Sometimes conflicts arise over goals and expectations, culture, parenting and sometimes this leads to a lack of communication and more difficulties with partnership building. And then Liz has just talked about some of the problems and crises that families face. Those can be quite overwhelming. Such stress often results in families feeling less equipped, less motivated, or have less time and energy to devote to involvement with Early Head Start and other resources.

So, it's important to think about this. These challenges can sometimes lead us to use terms to describe families like, oh, hard-to-reach, or difficult. And this can express our frustration, but labels like that tend to organize how we view families and how we interact with them. They can become self-fulfilling prophecies, so it's important to learn about all of the things that may be impacting success for the child and family, including life stressors, so you can work together to find solutions. So one thing we have to do is we always have to listen and explore and respect and understand the families we're working with. And not all – and that's not always easy.

So let's get to some of the ways to help a partner. First, partnership building begins the first time you meet with families, and here's an example of letting a family know about how you will be working with them. The words in red get across some of the important concepts that we'll continue to follow up on. We want to learn about attitudes and beliefs, so we want to say things like, we want to get to know you. And, okay, it's okay to disagree. Next we always want to think about building trust and to be clear on our roles, so words like how we work with families, and is letting them know exactly what's going to be happening. Showing respect. You are the expert. I want to help you help your child grow and learn. That's really empowering and it's helping families build their capacity.

So here's a diagram which outlines the key elements of partnership. The outside circle of respect and trust is the foundation of strong partnerships. So what are some of those practices? Well, recognizing and respecting our own and other's culture, language, beliefs and attitudes without judgment. Respect also includes holding what we see and hear as confidential. So, if you're in this foundation of respect and trust, I think there's three elements that really go toward strengthening partnerships.

There's, in the blue, there's active communication. When communication is simple and straightforward, it helps us avoid misunderstandings. Emphasizing empowerment, helping families to see their own strengths and increase their knowledge and skills around child development. And, very important, supporting the protective factors that build resilience in families. Helping them cope with stress that make it – may make it difficult to deal with the challenges of raising children.

So now let's go in a little bit more depth for each one of these. First we must come up – we're going to be talking first about respect and trust. First we must start with the basic beliefs, and that's what is up in the left-hand corner there. Families are potentially, or they can be, the most powerful resource in a child's life, and that they have the intention to be so. But sometimes this is hard to believe or hard to – because of many of the experiences I'm sure that you've had. However, sometimes – and sometimes we need to get support from our colleagues to really – to – to –to work with families, to keep that belief in our head.

Now if we look at the arrow below, we see that respect leads to trust, which underlies strong relationships. Respectful practices mean that you show that you value the family experience and show consideration with their particular situation. How do you show that respect? When you explore and ask questions. Checking in to understand the family's feelings and ideas. Using phrases like, "What do you think about this? And, how are you feeling about this?"

Now trust is established when there is mutual understanding, so by exchanging information and communication, families and providers will better understand their roles and responsibilities in the partnership. Again, by trusting that parents have the best interests of their child at heart. And they are appreciative allies. We are – we – we are an ally of theirs and we appreciate them.

Now we would like to get an idea of how often you may make use of some of the strategies that build respect and trust. On your screen is a set of practices. We need you to check how frequently you do these things. Always, sometimes, or rarely. So explaining your role; what will actually happen; keeping things confidential; letting families know that what they say is between you and them; working with parents to overcome barriers to involvement; preparing for your meetings; being an active listener; keeping families involved.

So we'd like you to sort of respond to each one of those, and then I think pretty soon we'd like Kelly to put up the results when there's enough up there. Kelly, is it ready? I know this is a number of them, so we want to – it may take a little time, but here they come.

So how often do people explain their roles? 37% say always. Confidentiality is really discussed 59, by almost 60% of the people, that's fantastic. Taking time to do this, which is really great. Logging constraints might be next. Our – what are those? Do you actually work with the family's to schedule, for transportation, and other kinds of things, to make meetings easier, 50%. Preparing for visits or meetings, meaning that, you know, as you get ready to meet with a family that you have in mind what you want to say, what you want to accomplish. And active listening is about half the people. Preparing in about 56%.

And finally, keeping families in the loop, always giving them the information that they need to move forward. There we go. A little less, 46%. So it's good to think about some of these things as to whether we need to sort of increase that – those percentages of – of the kinds of things that really will help in building respect and trust.

Okay, can we close down the poll? Great. Now I want to emphasize that learning about understanding and embracing diversity and culture is a big part of respect and trust. We've said this before. Culture, belief systems, traditions, views, attitudes. That's all part of culture and it influences how parents perceive their child's development, their education, the child's behavior, their responsibility, in partnering and – and being involved.

So it's really important to explore and understand a family's culture, and in the case that their perspectives are acknowledged, understood and that value has been shown so that you can lead to

greater family involvement and satisfaction. Well, what kinds of information would be good to know about?

Well, you want to know about communication and interaction styles. How does the family solve problems? How are decisions made? Family roles and styles. Who are the important people in – in their lives? How did things get done around the house? Who provides nurturing? Who sets the rules? Nat – What is the natural, informal support does the family have? Who is called when the family needs help or wants to talk? Attitudes about seeking help. How do you feel – how do they feel about asking for help? Really important.

And what have your family members or friends said about seeking help? And have they sought help before? And how – what was the experience? How did it work out? So we spent some time on respect and trust, the foundation of partnerships, and particularly, it's the foundation for families facing adversity.

So now let's move on to the next element which is empowerment. Parents want to help their kids, and helping build skills gives them a sense of competence and pride, and that helps you work with them. So to promote their child's development, which is one of the things that empowerment will do, but that's part of it. The other part is improving their own situation, finding the right resources for themselves, increasing their self-efficacy and effective decision-making.

Now what's your role in this? It's the role of facilitator. It isn't taking over and helping the family in – in – in – in ways that your sort of carrying the burden, it's – because in most cases families tend to refer to your knowledge and kind of lose sight of what they can do. But if you can start thinking about building their capacity and encouraging them to see some of the things that you might be able to do more quickly, at least a more sustainable change in their lives.

So how do we help build empowerment? Well, most importantly we take a strengths-based approach. And to do that, we must make sure that we are aware of family strengths and challenges, particularly previous successes. Talk about challenges and problems, but it's good to reframe them not so much as problems, but as learning experiences. What do we – what did we learn from that? What went wrong? What can we do better next time? And when there is a positive change that occurs, it's really critical to link it to what the parents did. A new approach worked. It wasn't that the problem changed, it was that your approach to it made a difference.

What are the benefits of using this strength-based approach? Well, they've been shown to increase the parent's belief in themselves, and increase their involvement in program services, and they help parents feel more comfortable in working with others. So let's see how we might use a strength-based approach with a particular situation. Now, in the next two slides, I want you to reflect on the vignette about a little toddler named Zachary who has been biting in his classroom setting.

Information was collected from the family during the home visit. Mention that the full vignette is provided in the guide for this webinar, but if you are watching as a group, you might think about what information stands out to you, and as I describe and talk about Zachary and his family, think about what would be important things to – to focus on when you're working with his family.

So Zachary's aunt has been fostering him for seven weeks, managing work and two children as a single mother. He's been biting his peers. The aunt is concerned that he'll lose his placement in Early Head Start. He uses little or no – no language; his pediatrician recommended only waiting 3 to 6 months before giving him a developmental assessment. Zachary has had little contact with his siblings; has not met his father; he has few toys in the house; he does like his blanket, and the stuffed bear, and loves to look at books. Zachary has not been biting in – in the – in the aunt's home at all, and he loves bath time, running around outside, and playing with and imitating older children.

Now you may have discussed things as you're thinking about this, such positive strength-based things as, you know, Zachary's aunt wants support. He has comfort items, he has older cousins to model from, his grandfather wants to be involved with – with family members, he likes bath time. So when coming from a strength-based orientation, you want to see hope and opportunity for change. So let's think about some specific strength-based approaches and words to use with Zachary and his family.

So first we want to focus energy on the positive skills and knowledge. Look for opportunities for families to test new strategies, so you could say something like, when you read that story to Zachary, did you see how he nestled into the couch next to you and his eyes brightened up? Next, you want to sort of encourage parents to take control. Remember, you want to build their capacity, choosing activities for their child and suggesting activities in the classroom, and remember, avoid taking over.

So you could say something like, what is working at home for Zachary that you might think we might use here at school? You want to share positive feedback. Boy, you know, Zachary went to his cubby and got the book you sent in for him today. He brought it to his teacher to read. That was a great idea to share something from home. – Point out how actions led to change. Again, building the self-confidence. You getting the pediatrician to make a referral for a language evaluation really helped get to the heart of the problem.

Showing belief that the family can learn, grow, and change. We have some work to do together and I believe with your help, Zachary can continue to learn new ways of getting what he needs. Focus on the present, and take time – to reflect on what it must be like to be in this family. Always think about putting yourself in somebody else's place. Empathy versus – and say things like, you're going through a lot right now. That must be hard for you. Empowering families builds partnerships, but also helps them deal with adversity, increasing their resilience.

So, now I'm going to move to element three, which is supporting resilience. This is another part of building partnerships. Parents with resilience are generally able to cope on their own, but they also know how to seek help in times of trouble.

Now stresses – stressors can come from different levels as shown in this figure, all the way from the wider society all the way to internal [inaudible] inside yourself. They may make it – all these stressors make it harder for parents to cope effectively with the typical day-to-day stresses of raising their children, but also parents can find resources within themselves.

They like faith or humor, and from external forces, like relationships with family members, friends and concrete resources in the community. So to strengthen partnerships, our job is to help parents understand the stressors and figure out how to cope with them. Here's some ideas about how to do that. So first of all, let parents tell their story. Convey understanding by using active listening techniques, and we'll be talking about that in – in just a little while.

Try to get an idea about how they're – what they're feeling right now. Part of that listening is to allow parents to talk about the stresses that are affecting their lives, but part also helps you problem solve possible coping strategies, including personal, and family, and community resources. And families often feel very isolated. Talk about what they hope for in the future, and you are there to support them.

So here's some ways to explore with families the type of stress parents feel. Where they come from, the coping strategies, and resources to help increase resilience. To have this type of conversation with families is important to practice what's called active communication, the final element of partnership building. This picture shows very active communication, but I don't think they're going to lead to any strong partnerships. But active communication has to be [inaudible] clear, and how to communicate. And if you communicate well with families, it'll really set the tone, a good tone.

So let's think about some of the ways that can improve communication. What is productive communication? First, it's important to attend fully. Often when people talk to each other, they don't listen attentively. They are often distracted, half listening, half thinking about something else. So if you're really paying attention to somebody, one way to show that is by restating, saying things like, "Hey, I heard what you say, that you felt frustrated when Cara's teacher said that she had problems and that you should set more rules for her."

You want to reflect back on what people say, including their feelings. "That must've been hard for you. I can tell by your tears that this is still upsetting to talk about." You want to interpret what you heard. "What I'm hearing is that this experience made you question your own parenting skills." And you want to do some summarizing and sympathizing. "Let's focus a bit on these questions around parenting."

Sometimes you need to get more information, but not to seem intrusive, and also make sure you and the family are on the same page. So you can do some probing and following up, like, "Tell me about some of the ways you feel successful as a parent."

Doing some supporting, too. "It sounds like there are many things that you do as a parent that support your child. Parenting isn't always easy, is it?" And you want to check in on perceptions that you have. "You think I've had a difficult time hearing that José was struggling in school. You felt like maybe you

haven't been doing enough to help him. Does that sound accurate or fair?" And sometimes being quiet is great, just listening.

So now we're going to ask your involvement again. We've covered some of the active listening practices, and we'd like you to tell us about – your use of them. So in the next poll, we would like you to choose one or two practices that you feel you do very well. This is the first part. So those practices are, and we just covered some of those, attending to others, restating messages, reflecting, interpreting, summarizing, probing, supporting, checking perceptions, and being quiet. So if you could just choose one or two that you feel that you do well. You can't do all of these well, I know that many of them I don't do.

I have to remind myself to do well, such as attending to others, and not thinking about something else, or the next thing I'm going to be doing. So once we get, in about another few seconds, we can see kind of where people are coming down on this poll question. Kelly, are we ready yet?

So it looks like restating messages is not something that people do all that often, which is interesting. Sometimes it feels like I think when you do that, that your it's – it's – it's – it's – it's something that's – it's – it's kind of silly, but really it's good to hear sometimes, because sometimes you – you – you don't actually get what somebody is saying. Interpreting looks like that's kind of difficult, too. Really saying this is kind of what I think you're saying, but sometimes that what – when you do that, it really helps the person feel that you're – you're in tune with them.

I see that people do a lot of supporting. And attending is actually something that people are – are – are pretty good at. It's saying that they do well. So supporting and attending, things that we kind of want to work on are the interpreting and the restating the messages.

So let's go to the next poll. In this one what we'd like you to do is choose one of two practices that you would like to use – practice more often. So it's the same list, but now what we'd like you to do is say, what are the ones that you would like to sort of improve on or practice more often. Now, it may link to some of the things we saw in the previous one. I know for me, some of these, the interpreting thing is often difficult to do because you feel like you may be taking too much of a leap.

Probing, it can seem intrusive. I think also often for me, I talk too much, so being quiet can also be a difficulty. So as soon as Kelly's ready, we can move on. So let's take a look at the results. It looks like restating something although people don't do it very often, they don't really feel they need practice on that. Probing does seem to be the one that's coming up most often. I can understand that. People do well with supporting and I think – and there's no – no need to practice that, which is great. Supporting is one of the key foundations. Okay. Well, thanks very much.

Oh, there they are. Checking perceptions is one that, again, is one of the higher. Probing and checking perceptions and those things are – are difficult, and I think they do need some practice. So let's get back. So just in seem – in kind of summarizing, it's important with active communication to really kind of be

sharing information. So it's particularly important to think about active communication when you're starting discussions with parents, because you're really trying to get as much information as you can.

You also want to use – share information when you're reviewing feedback on progress, and when you're gathering and sharing resources. And finding and keeping lists of resources for folks, and helping them find what they need is a really important thing, and I think we're going to cover that in – in – in the next section.

Victoria: Thank you, Bruno.

Bruno: And I'm going to turn it over to Victoria.

Victoria: Yes. I was going to say that it's really important to talk about community resources. You know, the concept that it takes a village to make things happen, right? I would like to make a point here about our program. The impact that programs have on families is huge, and what distinguishes – what distinguishes Head Start and Early Head Start Programs from other early childhood initiatives is that programs are empowered to promote children's well-being by engaging their parents, their families.

Partnerships with families happen in the home, in the center, and in the community. It's a shared responsibility with all those to support children's growth and development. I would like to share resources available on the topic of partner with families.

One of our sister centers, The National Center on Parent, Family and Community Engagements, has great material from their landing page on the ECLKC which stands for Early Childhood Learning and Knowledge Center, which is Head Start's portal – portal to information on the web. On it, you can find the parent, family, and community engagement framework. This framework helps program leadership identify specific program foundations, program impact areas, and family engagement outcomes. Check it out on the ECLKC. I'm going to turn back to Bruno one more time, and Bruno, could I ask you to highlight for us the systems approach to working with families?

Bruno: Yes, would love to Victoria. The – so we're going to be talking here about another key aspect really of family partnerships – of the family partnership performance standards, which is to help parents identify and access services and resources. So people trying to access needed resources often have trouble accessing the services they need. They want to know who the providers are, are they eligible, what are the requirements, how is it paid for.

So children of families who we work with often have multiple needs, which makes this process even more challenging. And one significant problem, as you all know, is the way that programs are siloed between various providers and agencies, and mental health, and child welfare, and primary care, and Early Head Start. So one thing to do, first of all, is to have – is – is what – first of all within Early Head Start to those – to those needs – resources within Early Head Start, to find a number of supports and services that can benefit enrolled families, and often it's important to link families with those services.

So family engagement is a key component of high-quality early care, and a cornerstone, as we know, of Early Head Start. Sometimes the programs have a hard time getting families involved, so let's talk about some ways to improve the organizations for family involvement. First of all, you want to always have a focus of family partnership being a part, a really strong part of your work and about your organization.

Second, you always want to come back to family goals and beliefs in helping them see the benefits of enrollment, involvement in partnerships. You want to link what they need to what they can – to how – to the benefits of enrollment. And finally, family involvement can be challenging and sometimes out of frustration, we can fall into unproductive beliefs about families.

But families, as we've learned, can be overwhelmed, and they really often – it's that sense of saying, I don't want to take on one more thing that keeps them from getting involved. Doing what? Be willing to listen and respect, and really support them in this way. Now, how can we help with the larger picture moving from silos to systems? How can we link those different program services and agencies that families are often involved in?

First, we need to take – understand the importance of – of thinking about the system as a whole. Researchers found it's important to link the effective services and support systems. Families may have plans from other service provider's or organizations that may conflict or overlap with those in Early Head Start. So help the families gather the information they need to coordinate with other agencies and make the families aware that you advocate for them when possible. You want to explore a team approach to connecting families to relevant systems.

You know, you can connect with other kinds of really good support services, like parent training and information centers, and identify other involved organizations and service providers and supports, and they'll be very helpful with that. And remember to emphasize your willingness to work with all the parties to produce these cross systems goals. We also talked about collecting important resources, so having a list of resources for families to use is – is great and really helpful, and you want to follow up with families to get feedback on how they feel about contacting those resources.

Now, how to help these families reach out to these other supports that they may need. You want to – anticipate concerns, which many families have about seeking support, so try to really elicit those concerns, and some of them might be things like stigma, embarrassment, shame about needing help. – And often, families seek services and they may actually be very worried that they may be blamed or spoken to condescendingly.

They may have negative expectations about involvement with those services, sometimes stemming from their previous involvement with the same services. And families may have worries about what might be expected of them when they actually contact the other resources, what can they expect, will they have anything to contribute, what will they have to disclose, will things be confidential, all of the things are really important to talk about with families to help them reach out. I'm going to now turn things back to Liz and to sort of have some final words on this topic.

Elizabeth: Thank you, Bruno. What you've delineated is how to respond to multiple issues and strategies that are effective in responding to the multiple needs we encounter when working with families and young children. And often we find ourselves working with families who are coping with adversity and stress, and this is very stressful for us as service providers.

Some of the feelings that are invoked in us are hopelessness, anger, and we often encounter rescue fantasies, as well. Burnout and vicarious traumatization are real risks. Self-care is essential in order for us to be effective. Some of the obstacles we encounter and challenge our effectiveness is insufficient knowledge, losing our perspective, emotional over involvement.

You mentioned the silo effect, so the impact, [inaudible] the fragment our relationships when we work with multiple service providers involved with the same family. We also need support and a lack of support will impact our work negatively. It's important to seek out supervision or consultation regularly. Reflection means stepping back from the immediate intense experience of hands-on work and taking the time to wonder what the experience really means. What does it tell us about the family? About ourselves?

Reflection in a supervisory relationship requires a foundation of honesty and trust. The concept of collaboration, or teamwork, emphasizes sharing the responsibility and controlled power. We obtain our power from the knowledge about children in families from our field and our work. Neither reflection nor collaboration will occur without regular – regularity of interaction, so consistency is important in building relationships. Remember that we are seeking support and promote relationships within a family that enhance a child's development in every way. Therefore, our relationships within the agency, with our colleagues, with our supervisors, with our supervisees, parallel and are infused with these same qualities.

Victoria: Those are great thoughts, Liz. Thank you. It appears that we are getting close to the question and answer segment of this webinar. Any final thoughts, Liz or Bruno?

Elizabeth: Yes. I'd like to add that we should not underestimate the power of our relationships with families, and we can track all changes and – in – such as a phone call you may receive from a family to cancel instead of not showing up for our meeting. Impasses are part of life. These are important opportunities to demonstrate and manage negative feelings and examine these in a respectful and professional manner with families.

And let me just add that Early Head Start and Head Start Programs are in a unique position to engage families who are experiencing adversity, and work with them hand-in-hand to support them in achieving their goals for their children and their family.

Victoria: That's a wonderful thought to end on, Liz. Thank you both. Bruno, would you like to add anything else before we move on to the question segment of this webinar?

Bruno: Well, I'd just like to say, and this is both from my own personal experience in working with families in Early Head Start and Head Start and – also, from research, that actually the relationship that families form with any type of provider is probably the most important thing in determining whether change actually occurs in what they – want – in what they want to achieve. It doesn't often have to do with some particular kind of intervention or curriculum. It has to do with that relationship that's built and the partnership and the engagement, so again, that's just sort of talking a little bit more about the importance of these partnerships and relationships.

Victoria: Great. Thank you, Bruno. Now we would like to open the line for our participants to ask questions of Liz and Bruno. It works like this. Go to the private – private tab that's at the bottom left corner of your screen. Click on leaders and assistants, and enter your questions there. Don't be shy; this is a great opportunity to have our – speakers respond to your particular questions. Let's see.

Let's give you a few seconds to communicate with us. We will be reading your questions as soon as they come in. We have already had some questions come in. I guess this one is for Liz. Liz, the question is what are some strategies within the context of the curriculum to work with children who have been exposed to toxic stress?

Elizabeth: Yes, you know, what often helps a child – a young child manage is to maintain usual routines; to make sure that the child is not being isolated in the attempt to control behaviors and responses; to provide a safe place or help the parent provide a safe place where the child can talk about or – or express experiences, such as in play.

Be sensitive to potential environmental triggers that may cause a reaction, such as transitions or separations or changes. Prepare the child in advance of a change in routine, or other event that could be unsettling. Nurture the child for positive self view, and draw on cultural and familiar assets that the child and family bring.

Victoria: Thank you, Liz. Bruno, would you like to add to Liz's response?

Bruno: Well, I think that Liz covered some wonderful technique strategies. I think one thing that I'd like to say, though, is it's not to sort of press the child to talk about necessarily the stressful and toxic stressful events.

You need to take the lead from the child, and we talked about doing it in play, often people feel like it's really good to sort of ask and push the child to sort of talk about what happened to them, but it's really important I think, I think this is a very important piece of research that's come out, to wait and take things slowly and wait for the child really to start the – start the conversation.

Victoria: Thank you, Bruno. Here's another question, and this one came in for you. What particular family strengths do you think are the most important to build on?

Bruno Anthony: Great question. I think that, you know, while we talked about the importance of support, and I think that what you really want to investigate early on is really what are the possible support mechanisms that – that families have. Often they – just by talking about it they suddenly realize that there's some things they haven't called on before, or it allows them to talk about their concerns about reaching out to support from, you know, to certain people or to certain organizations.

And they have some concern over them, even though they may be very helpful. So one thing I think is to – is in that the strengths are that there are probably often supports there for families and sometimes it's – it's hard to identify without really talking with somebody about it, and I think that the goal of providers is really to do that.

Victoria: Liz, would you like to add to Bruno's comments?

Elizabeth: Yes. I think I use myself often in relation to a parent in – in - in – in reflecting and learning strengths that I'm encountering, that I'm experiencing in my relationship with them. It's an opportunity often not – our families don't often relate this way or have that history, and so I try to really take the opportunity to – to let them know that they are here, they showed up for my appointment or for our appointment, or they – they went out of their way to call me to cancel, and – and I appreciate that.

I reflect those strengths to them, even though they don't think of them as strengths often. They don't. And often we are in the process of realizing that they – families are unaware that they could be appreciated this way.

Victoria: Thank you, Liz. We have another question that just came in and this one actually makes me think of when I was a home visitor myself, and you walk into a home and you have – you observe multiple challenges and the parent feels that he or she wants to share a lot of things with you first. And here you come into the home with all your materials, prepared to talk about child development, and you find all those challenges in front of you. So what are your thoughts about addressing parents' concerns first?

Bruno: Well, and I'm sure Liz can speak to this, as well. We can start by saying, I feel like it's really important to acknowledge those concerns and certainly address them in a way that may not be complete to begin with, but at least as I'm listening to what you're saying, part of the thing what you also want to do is to also talk, and this is where this mutual sharing goes on. So let's say that there are certain things that you have to carry out in this visit, bureaucratic things or questions.

So you can say this is kind of what my – I have to do in this visit, and I know that it's not, you know, right on your mind at this moment, so let me hear a little bit about what you're saying so I can get a feel for it, and then we can move to – to – to what I need to do and then come back to what you said at the end. Something like that. Acknowledging both sides of the relationship I think is really important.

Victoria: Thank you, Bruno. We have a lot of questions coming in, and I'm so glad that – our audience is tuned in and wants to – have you respond to all of these. The next one is – what resources do you suggest regarding professional boundaries?

Elizabeth: Resources.

Victoria: Yes, any – Liz or Bruno, would you like to respond to that question?

Elizabeth: Sure, I – I can respond to start. You know, I think one important – acknowledgment is the limits of our scope of practice, the limits that we have. For example, I'm a clinical psychologist, but I'm not a substance abuse counselor.

When engaging with a family that has both mental health issues and substance abuse issues, I can only do part of that, and I need to identify resources within a community where I can then connect a family to address substance abuse issues. Now, I need to recognize that that there is that limit within me, and in my – in my own role as a home visit or mental health specialist.

And also, in terms of... the boundaries, you know, there is a lot of flexibility within our own roles and agencies, and it's important to – to understand how flexible we can be. It's important to be genuine about our flexibility and – and not necessarily go out of our way at one point when we aren't able to really keep a stance and – and will be something that we will need to.

So for me, resources involve a lot of reflection and – consultation and supervision, and informing myself of the various issues that our families face, such as domestic violence and how that appears, – and issues of immigration and stressors involved in – in families that are experiencing that, for example.

Victoria: Thank you, Liz, and you know, what comes to mind is an audio conference that the Early Head Start National Resource Center had on – in November of 2012, so if our participants would like to check it out, it's a wonderful audio conference. It's on the EHSNRC landing page that is in the ECLKC, the title of that audio conference was Professional Boundaries and Work with Expectant Families and Infants and Toddlers and Their Families. So check it out on the ECLKC, and then go to the Early Head Start National Resource Center landing page.

I have another question here, and let's see who would like to take that? Liz or Bruno? It is, do you have techniques to deal with a negative attitude towards parents or conflicts in – in a culture or different belief system? Bruno: Well, I think that – the first thing is that if to – to – to recognize that and that's sometimes not easy, but if it is – something that you're aware of, or if you're aware of it in somebody else, I think that it's very important, and Liz has talked about getting supervision and talking with other people around.

I think this is a really, really important barrier that can really prevent partnerships from building and so I think that, you know, if you're feeling it – one thing actually is that very interesting on that – I'll tell you

about a website which is something that is kind of – it's called the National Center for Cultural Competence. It actually comes out of Georgetown University, and in it there's – there's a very useful set of tools around assessing your own cultural competence and the ability to – to work with folks.

And – and it's a self-assessment. It's not supposed to be something that, you know, judgmental, it just allows you to sort of think about things in a little different way. And then also there's a lot of resources on how to approach those kinds of these – the situations where you do have those kinds of feelings or somebody else does. So I would really recommend that.

That's a great resource.

Victoria: Liz, would you like to add?

Elizabeth Lujan: Yes. I – encountering in supervision or in consultation home visitors that are having difficulties, that are culturally connected, I – you know, it's interesting, I often find that it – it's triggering the – the home visitor in some way.

Something within that relationship or perhaps reminders of – of their own experiences, early experiences, and – and this is – this is also a boundary a little bit with supervision is, you know, how much do we support our – our – our home visitors to express their – their – their negative feelings and allow them that space with us to express their feelings, in the hopes that it would alleviate.

If we're nonjudgmental with them, if we're allowing them to express themselves, that the hope would be, the parallel would be, that they would also give that space back to the family. And so that's how I think about it, in general. But also, I – I noticed that in that space, I might encounter more personal types of reminders and problems, and then I, you know, I can make decisions as to if I'm the appropriate person to – to perhaps this particular home visitor needs more support outside from my own supervision. But I do try my best to give that space to – to home visitors to express their – their burdened feeling and negative feelings, allowing and hoping that then that would relieve them and –and checking in with them.

Victoria: Thank you for bringing up the topic of home visiting and the challenges that it brings. I can think of when I was a home visitor, I – I don't know that I could've been able to do it without reflective supervision. So thank you, Liz.

I have another question here, and this one makes me think of families who do not feel comfortable speaking English and accessing services. Let's see who would like to respond to this question. What do you suggest for families who keep being referred to the same services time and again, yet those services are not able to sufficiently help the family? We find community services sometimes that do not have providers that speak the family's language, so how – what can we do to bridge this gap?

What do you suggest for those families who are being referred time and again, and those services are not available to them? Liz or Bruno?

Bruno: Well, I agree it's a – it's a very big problem, and one thing that I've found useful and one thing that I think has been growing is the ability for family to family organizations like the parent training centers which are in every state, to be able to locate those providers who – or services which are more – have resources that – for folks who – who were [inaudible] a native language.

And, you know, I think what I've seen in the last five or 10 years is a big increase in that – in people understanding that this is a problem and starting to really improve those – that level of service. So I would say that one thing is to really check into those kinds of resources in your home state and/or community because I think that they are – really are increasing.

Victoria Prieto: Thank you, Bruno. Let me back track a little bit. Can I ask you to repeat the name of the Georgetown resource for self-assessment?

Bruno: Sure. It's called the National Center for Cultural Competence, and if you Google that, just National Center for Cultural Competence, it'll come up. It's within the Georgetown Center for Child and Human Development, but – a direct – you don't forget that directly.

Victoria: Great. Thank you so much. I also would like to remind our audience that there are additional materials on culture located on the ECLKC, and if you would like to go to the ECLKC and go to the National Center on Culture and Linguistic Responsiveness, the NCCLR, they have a ton of materials there. So take a peek, and – and you will be surprised. There are great materials there.

Okay, we have another question, and this one is on resources for active listening. This is something that not all of us know how to do well sometimes. So the question is, can you share some resources for active listening exercises that programs can use to during staff training?

Bruno: You know, – I could certainly do that. – I'm not off the top of my head because I don't think I have them right here in front of me, but it's – there are many excellent resources for that. And I don't want to, you know, you can certainly Google active listening and you'll come up with a lot of those kinds of resources. But, you know, one thing we can certainly do and maybe Victoria, is there a way that we can actually post some of those things later for people to look at?

Victoria: Sure, we will do that later on. We'll post them on our website.

Bruno: Okay.

Victoria: Liz, do you have anything you would like to offer in terms of...

Elizabeth: Yes, there is this – The Home Visitors Guidebook by Carol Klass is – has a lot of neat lists and activities for active listening, but also for identifying strengths in your conversation in a very natural, conversational way with – with families.

Victoria: Great. Thank you, Liz. Thank you. This is great information. I have another one here. We're going to try and get all of your questions. This one is, how do you help families recognize their strengths without putting words in their mouth, especially when they think they don't have any? Who would like to take that one?

Elizabeth: Well, this is Liz. I'd like to take that one for a minute. Yes, it's really tricky to do that, and in Carol Klass' book, there's actually examples of questions and conversations, as well as, lists of strengths in an activity on how to identify your own strengths, and what we mean by strengths. So it's – it's not very productive to – to go in and just ask anybody, so what do you think your strengths are?

You know, it sounds like an interview, right? And it's not natural in an organic way that comes up in conversations. But at times, for example, you will engage in that once you can identify, – for example, how they might have solved a past problem, such as, you're out of [inaudible] infant formula. Maybe they'll [inaudible], and you – in your visit. Want to provide that, but you say, so how did you solve this problem last week? And this is a way to identify a strength actually, because then you are indicating that they have already addressed this, you know.

Maybe it's not sufficient, but they do have some strengths.

Bruno: Yes, and I'd just like to add, that's a really good part, – I think it's – it's, you know, do that active listening, if you're listening for things and often what you can hear is, and it doesn't have to be a big thing, you know. I think really you want to – for those kinds of situations where people really don't feel they have any strengths, which I think is awful and folks are coming in who are under a lot of stress, happens [inaudible] is just listen very carefully for small things that you can – that you can focus on that – that – and if you listen carefully, I think you'll hear some things that you can work with, – you know, and then just sort of build on those.

And I think the idea – sometimes people don't even know what strengths are themselves, but if you try to locate something within the conversation you're having, then it starts a, almost like a cascade of things.

Victoria: Thank you, Bruno and Liz. We're coming close to the end of this webinar, but I have one more question our participant sent in. This one is, can you share some ideas for supporting staff who may be struggling with similar adversities of the families they work with? Should I repeat the question?

Elizabeth: Yes, please.

Victoria: Can you share some ideas for supporting staff who may be struggling with similar adversities as the families they work with?

Elizabeth: Yes. You know, this is where I'm thinking about how the work with families often – reminds us of our own perhaps early challenges with our own family, and – and that, you know, it comes up often when working with our young children. They're – they're reminders of our own experience, but at times, and – and we need to figure out how to process those feelings on our own, as well as in supervision.

And so I think that selective supervision, a consultation with other colleagues, forming a group with other colleagues who are doing the work like yours, and – and having similar experiences, often helped me to be able to not lose my perspective.

Bruno: And – and – and I think just the last few things is that really the kinds of things that we've been talking about today, of how to, you know, link in and work with and partner with families, are the kinds of things that help, no matter who the partner is and that thinking about some of the things we've been talking about today I think will help link with those folks who – providers who need – who need the same kind of support. I'll leave it at that.

Elizabeth: I think it's really important to – to recognize that when we work with these vulnerable families with multiple issues, we need to really realize that we can't do it alone. We really need a team and – and an effort that we need to identify in – in our work. Who is there for us? And who are there for our families? To identify those resources for ourselves and our families, because we will need to depend on them.

Victoria: Thank you, Liz. That's a great way to come to a close on that thought. Unfortunately, we have not been able to get to all of your questions. However, if we did not get to your questions, we will be posting questions and answers on our webpage. Thank you, Liz, and thank you, Bruno, for being here with us and sharing your knowledge and expertise with us today.

And thank you to our wonderful audience for your participation. I am taking all of this in, and I hope that you are, too. So we'd like to see you back next week for the webcast on Monday. We're going to start track D of the virtual Birth to Three Institute. So for now, goodbye. Adios.

Elizabeth: Thank you.