

**Module: Family-Centered Practices
for Infants and Toddlers With Visual Impairments**

**Session 3: Support-Based Early Intervention
and Developing Ecomaps**

Handout B

Understanding the Family Ecology

R.A. McWilliam, Ph.D.

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Family-Centered Intake Visit

Families want to know what early intervention is about and what types of resources are available to them. Programs have other business they also need to accomplish during an intake visit, such as informing families of their rights, securing permission to evaluate the child, and getting some background information.

These are things that work:

- Give families information they can review later
- Describe briefly how children learn and, therefore, why support is so important (see “How Children Learn”)
- Read information to families only if they appear unable to do so themselves
- Make sure the visit is in a language the family understands; if it’s not, make arrangements (somehow!) for another visit
- If you have time, ask the family to tell the child’s story, beginning when the child was born—or earlier if appropriate (see “The Child’s Story”)
- Whatever else happens, develop an ecomap
- Demonstrate respect and partnership by what you do

These are things that don’t work:

- Don’t describe early intervention primarily in terms of services, even though you will tell families what services are available
- Don’t drone on and on about legal issues that sound as though something bad could happen

- Don't take a medical history, asking questions that have nothing to do with evaluation or intervention (e.g., "Did you smoke during your pregnancy?")
- Don't use a questionnaire to get information
- Don't pay lip service to respect and partnership

How Children Learn

Young children learn through repeated interactions with their environment, spread out over time. They don't learn in "massed trials" or intensive lessons. That's why early intervention is not like school or therapy for older children. Because this is how children learn, their learning occurs throughout the day from whoever is around them during the day. The early intervention professional's job is to make sure that those regular caregivers, such as parents and other child care providers, have the information, encouragement, and materials to take advantage of learning opportunities that occur throughout the day, wherever the child happens to be. The intervention the child receives is, therefore, what happens between visits with professionals.

Does this mean parents have to be the teachers or therapists?

Not exactly. They have to be the parents, and parents are naturally teachers and "therapists." Whether parents intend to or not, they are already providing their child with learning opportunities and teaching their child. When a family receives early intervention, professionals can give families support to make this teaching most effective.

Research Note

Families interviewed 1 year after their children had been in early intervention were asked how come their children had made nice progress (see box below). Many families said because of early intervention—they ascribed their children's learning to the sessions with therapists and other early interventionists. In fact, their children had made progress because of what they, the parents and other caregivers, had done, not because of the direct, hands-on work of the professionals. The professionals had contributed by supporting the families (encouraging them, giving them information, and giving them access to materials).

These findings came from a study reported by Harbin, McWilliam, and Gallagher (2000).

The Child's Story

Hearing the child's story is an optional activity, but it can provide a lot of information and convey to the family that what they have to say is important. This could take a while, so intake professionals need to think carefully before making the investment. It can begin as simply as, "Tell me your child's story. Why don't you start from his (or her) birth?" You can ask as many or as few follow-up questions as you think are appropriate for the situation. There's no right or wrong. You're simply trying to get the family's perspective of how things have been going.

To move the story along, you can simply ask, “And then what?” Use good conversational skills, such as

- Making appropriate eye contact
- Nodding, saying, “Hm-hmm” and “Really?” and otherwise showing interest
- Avoid passing judgment at all times

The Most Important Activity of the Intake Visit—Ecomap

The ecomap is a picture of the family’s perceived informal, formal, and intermediate supports, but that’s not how you introduce it to them. That would sound terribly technical and boring. Instead, say to the family, “As we proceed through the steps to begin early intervention, it would be helpful for me to understand who all you have in your lives already. These people might be sources of support to you or they might be sources of stress. But figuring out who is involved will help me make appropriate suggestions. OK? I’d like to start by asking you who lives at home with you and your child.”

The questions proceed from there, but the introduction is important. It explains what you’re doing and why.

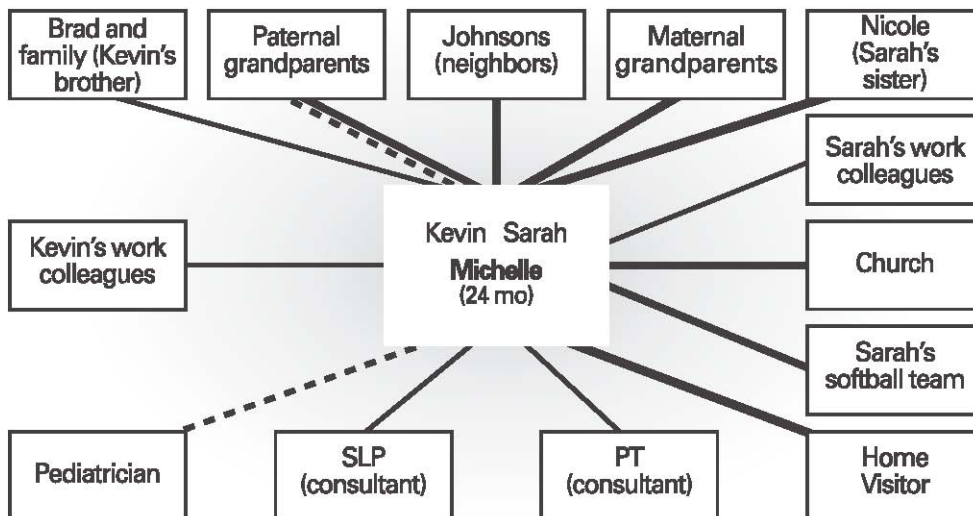
The following steps describe the process:

- Introduce the ecomap.
- In the middle of a piece of 8 1/2 x 11 paper, write the parent’s name, the child’s name and age, siblings’ names and ages, and whoever else lives in the home. Draw a box around these people who live in the home.
- Do not ask, “Who’s your husband?”, “Are you married?”, “Who’s the father?”, or similar questions.
- Ascertain the amount and types of family support available by asking, “Did you grow up in this town? Where are your parents? How often do you talk to them?” Ask other questions getting at the amount of support the family gets from these people.
- Write Maternal Grandparents in a box somewhere above the nuclear family.
- Draw lines from the Maternal Grandparents box to the nuclear family, with the thickness of the lines showing the amount of support. Thicker lines demonstrate more support. Dotted lines show stress.
- It’s possible to have both a solid line and a dotted line extending to the same support.
- Ask questions about the father’s parents, if appropriate, and about other relatives.
- Ask questions about friends of the parent you’re talking to and about the other parent’s friends.
- Conclude this informal-support section (all drawn above the nuclear family) with, “Are there any other relatives or friends that should be on this picture?”
- “Now, tell me about services your family receives.”

- Prompt about early intervention services the child already receives, which will be none during an intake visit but will be some during a follow-up use of the ecomap. “Formal supports” are put in boxes below the nuclear family.
- Ask about medical services and other services the family receives, such as financial resources. Don’t forget insurance.
- Ask about “the people at your work... at your husband’s (or wife’s) work.” “Intermediate supports” are put in boxes beside the nuclear family.
- Ask, “What do you do on Sunday mornings?” (or Saturdays, or Fridays, whatever seems appropriate). This is designed to elicit their mentioning church, temple, mosque, and so on—very important sources of support to many families. These intermediate supports also are placed beside the nuclear family.
- Ask the parent, “When you look at this picture, is there anything else we should add?”
- “Thank you very much. This will be helpful in my understanding who you already have for different levels of support in your life. That will make my suggestions much more relevant.”

See the example of a completed ecomap on page 165.

Kevin, Sarah, & Michelle



This ecomap is a graphic portrayal of the informal, formal, and intermediate supports for Kevin, Sarah, and Michelle, who is 24 months. Their names are in a square in the center of the ecomap. Above this square is a row of rectangles that represent the informal supports of the family. Rectangles below the square represent formal supports, while rectangles on either side of the square represent intermediate

supports.

The first informal support depicted at the top lists Brad and family (Kevin's brother); a medium line representing a supportive relationship connects this rectangle to the square with the immediate family's names. Rectangles depicting the paternal grandparents, the neighbors the Johnsons, the maternal grandparents, and Nicole, Sarah's sister, are joined to the square with bold lines representing strong sources of support. The paternal grandparents also have a dotted line that represents a stressful relationship; the relationship with the paternal grandparents is strong and supportive but also stressful.

Below the square with the immediate family are rectangles that represent the family's formal supports. A dotted line connects the rectangle for the pediatrician, suggesting a stressful relationship. Rectangles for the speech language pathologist and physical therapist that consult with the family are joined by medium lines, suggesting supportive relationships, while the bold line connecting the primary home visitor represents a strong support.

Along the left and right sides of the square are rectangles that represent intermediate supports for this family. Kevin's work colleagues are shown on the left and Sarah's work colleagues are shown on the right, with medium lines representing supportive relationships. On the right side of the square, rectangles representing Sarah's softball team and the family's church are connected with bold lines, representing strong support.

The information in this handout was developed by Project INTERGRATE. From 1997–2001, Project INTEGRATE was an outreach project funded by the U.S. Department of Education, Office of Special Education Programs. We set out to provide training and technical assistance in the area of integrated therapy and instruction in classroom-based programs, which we still do as needed. But by far the greatest demand has been for help to programs and states on the implementation of the natural-environments provision of the early intervention law. Project INTEGRATE has provided training and technical assistance in over 40 communities in 17 states plus Puerto Rico and the U.S. Virgin Islands.