**Learning Guide 5.5 Family –**

**Voices from the Field**

**Objectives**

Identify practitioners’ and families’ views on critical issues related to family-professional partnerships.

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| Related Content:[Module 5, Voices from the Field](https://rpm.fpg.unc.edu/module-5-family-plan/voices-field)Instructional Method: Discussion and discoveryLevel: IntermediateEstimated Time Needed: 20min.Learner Form: Transcripts |

**Description**

In this activity, learners will identify strategies and considerations that will help inform their practice for working with children and families from special populations. Learners will work together to create an email correspondence letter to send to the practitioner/family member.

**Materials/Resources**

Voices from the Field transcripts for Module 5 – Family.

**Facilitator Instructions**

1. Break learners into three groups (if the class is larger than 12 students, choose multiple groups to work on the same transcript). Provide each group a copy of one “Module 5: Voices from the Field” transcript.
2. Allow time for learners to discuss the points made by the practitioner or family member using the following guiding discussion questions:
	1. What did this practitioner or family member say that resonated with any experiences you have had working with young children?
	2. What have you learned about implementing family practices with specific populations?
	3. How do you think these practitioner and family voices will help to inform your own practice?
3. Instruct learners to draft an email (individually or collectively) to the practitioner or family person describing how their insight will help inform their practice and asking two questions about how this family or practitioner utilizes the DEC Recommended Practices for Family to support positive outcomes for children and families.

**Suggested Assessment**

None

**Distance Learning Tips**

* Allow groups to respond to questions after listening and/or reading the transcript in online forums.
* Email drafts can be done individually.
* Provide timely feedback.

**Transcripts**

## Ann Turnbull

The Importance of Empathy

I vividly remember a phone conversation I had with a nurse in 1991. First the context-- My son, Jay, who experienced an ID, autism, and a bi-polar disorder was in a crisis phase. He was 22 and had recently been expelled from the only adult service system in our community. He was expressing his angst through aggressive behavior toward himself and others. He would bang his head on the wall, pull his hair, and make loud, groaning noises. He would also vigorously pull the hair of his paid caregivers and family. It was tough.

Back to the phone call. I was calling to make an appointment with a neurologist known to excel in psychotropic medication for individuals with significant disabilities. I vividly remember the nurse telling me in a matter-of-fact way that the doctor could not see Jay for over two months. She was very straight forward and impersonal. Her words sounded empty to me. I was doubtful we could survive for 2 months. I remember still today –a quarter of a century later—that I longed, really deeply longed, for something more.

I wasn’t expecting her to fix the problem for us--to break someone else’s appointment to get us in or to have a magic wand for Jay. I was longing to not feel that I and my family were not utterly alone. I was longing for empathetic communication.

Empathy is understanding feelings, thoughts, and actions of another by taking his or her perspective. Taking another person’s perspective enables you to develop a deep understanding of the other person’s vantage point as contrasted to making interpretations solely according to your own vantage point. Thus, a key element of empathy is that there is no judgment or criticism of the other person.

In order for families to feel heard, your own understanding and respect for their perspectives— your inside empathy—is a necessary component; however, inside empathy is not sufficient. You must also be able to communicate your understanding and respect to families; thus, you must incorporate outside empathy into your ongoing interactions with families. Your best work as a professional occurs when you combine your inside and outside empathy to hone your skills of empathetic communication.

Empathetic communication incorporates the basic fundamentals of empathy (e.g., understanding the feelings, thoughts, and actions of another; taking the other person’s perspective) and the basic fundamentals of communication (e.g., speaking clearly, making eye contact, leaning forward, smiling, and nodding), but involves an additional dimension. Empathetic communication also involves tuning in to the feelings, thoughts, and actions of another person by taking his or her perspective and then communicating that you respectfully understand and care. Some steps you can take to engage in empathetic communication include:

* Listening with your heart as well as your ears and eyes,
* Seeking to step out of your shoes and into the shoes of others who are facing challenges and feel what it’s like,
* Bringing feelings into the open—noticing, naming, responding, validating
* Communicating that you understand and care.

This is what I needed for the nurse to say—

*I hear in your voice that you are feeling desperate for help. If I were in your shoes, I would feel the same way. I so wish we could get Jay in earlier. I am happy to put your name on our call list, if we have a cancellation. Right now, though, I want you to know that I care about what you all are going through and trust that better days are ahead.*

If that had happened, I likely would have still remembered it a quarter of a century later, but this time I would have remembered it for its restorative boost in my journey to support Jay, my family, and myself in experiencing quality of life.

## Chaw Chaw

# **Q1: What is the best part of your job?**

The best part of my job is working with families who have come to this country as a refugee like me. We need a lot of support. We need a lot of people who will love and care for us. Who will teach us and understand us. Because we are not educated sometimes it is hard to adapt to the culture, language, food, and social life here in United States.

# **Q2: What is the most challenging part of being a bilingual home visitor?**

Being a bilingual home visitor, the most challenging part for me is when I have to be a culture broker for some families. When the family is not engaged with other services such as their children need special needs, and the family cancel the service and decline the service. For example, I have a family who are referred from health department. They need the service for speech therapy for the child and she need therapy for herself for mental health, but she cancels all the services that she gets, and she just said, “I just want you alone to come and visit me and I don’t want other service.” Then I feel like oh, I cannot do you by yourself. I need to come with a specialist and refer her to other service. But she still declined that. She doesn’t want anybody to come to see her except me.

# **Q3: What would you like professionals in the field of early childhood education and early childhood special education to know about working with refugee families?**

First of all, I want them to be patient and give the refugee families some time to learn and trust because they have been through a lot of trauma in their own country. And I would like professionals in the early childhood education special education to know about working with refugee family is that when you learn their culture, working alongside with their own community and their own community leader because they trust their own community leader.

# **Q4: Can you share some of your knowledge about how professionals should attend or tune in to cultural differences in order to be an effective service provider?**

Yes, I want to share some of my knowledge about professionals should tune in to culture different in order to be an effective service coordinator or to be trust by the family so that they can be a good partner and to be patient. The family are in learning process and be a part of them. Participate in their events. Learn from them as they learn from you. Point out their needs and let them get help, especially family with mental health and children with delay in developmental. When I said especially our family with mental health, in our culture, they think they can cope with it, mental problem. They are ashamed when people know that they have mental issue, or they are shy to talk about it. And when I say about the children with delay in development, they think child development is not important for them. They don’t know what kind of delay, even when they know they want to wait and see till the child turn five or seven years old.

And to be an effective service coordinator, try to understand their culture and learn how they practice. Be a part of them so they will build up trust with you and work with you better. Some of their culture are unacceptable here in the United States such as punishing their children by hitting or beating them, threaten their children, it’s like empty threat, when the children misbehave. You will have to redirect them how to do in this country at school or at home. And let them know they are not alone. There are resources around our community who can help them. It takes a whole village to raise a child. We the professionals are here to help them to a successful family, healthy, happy children and live a better life. So, they believe that every family love their children, but they believe that if you don’t punish your children you don’t love them. So, kind of like, part of their culture they use to raise like their parent do to them.

## Gabriella Reyes

# **Q1: With Diego you had a choice to make. The school system said he could be in a special classroom with just a few children and a teacher or he could go into to a larger classroom of typically developing children that was inclusive. How did you decide that?**

It was a difficult decision, first to put him in school and separate him from me. It was difficult for me because I think, I felt he was too little to separate him from me. I decided to enroll him and opted for a classroom with children. He could have been in a class with children with special needs, he would only have 3 classmates and a lot of adult attention, but Diego did not know how to play with children. I wanted him to have the opportunity to learn to play with other children and I decided to enroll him in the regular classroom with children that do not have special needs.

# **Q2: Even though it was a hard decision, do you feel that you made the right decision?**

Well, I don’t know if I made the correct decision. I was always indecisive, but I wanted(pause) everything that I always do I have done it so that Diego could be better, and I saw that Diego grew a lot and he learned to play, he learned to share with other children, because he could be surrounded by children, but he was in his own world. He would not engage in the games and Diego learned to play with children. Now the only noticeable disability is his language. It is the only thing.

## Kate Boone

# **Q1: How were you involved in your brother’s therapy or other special services?**

I am three years older than my brother, Matt. He had a severe speech disability when he was young and I would go with him to speech therapy. He would cooperate and do things for the therapist if I would come along and do as she asked – he basically wanted to do everything I did. Also, when he was younger I was the only one who could understand him. This meant that

I was often his translator and helped calm him down when he was getting frustrated.  Even my Mom would sometimes have to ask me what he wanted or was trying to communicate.

# **Q2: What worked well and how do you wish you might have been more involved?**

 I wish I could have done more. Looking back I don't feel I was as involved as much as I could have been. But he and I played together a lot – and I think that helped him. Even today, now that he is 20 and I am 23 – we are still best friends and have many of the same interests. The issue is that I am really his only friend – he has always preferred me to other people his age or close to his age. I guess he is more comfortable around me.

# **Q3: What advice do you have for professionals about how they might include siblings in their brother or sister's services?**

If speech is the issue then teaching the sibling alternative ways of communicating, such a sign language, would be helpful. Having just one person who can understand you goes a long way in making anyone feel better about themselves – but my brother needed more social contacts and communication help.  Also, it would be important that siblings even at a young age understand their brother or sister’s disability, what it is and what it means. I never knew exactly how to explain things to my friends who would come over to our house.