Parent agency in promoting child learning: Family perceptions of focusing on family strengths during early childhood assessment and planning practices

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Abstract

Identifying family strengths is central to early childhood practices. Moving beyond identification to exploring and explicitly applying those strengths can evolve strengths-based and family capacity-building practices. Assessment and planning processes that focus on the strategies families use to help their child learn can give agency to families in this parenting role. This exploratory study examined the perspectives of seven families who participated in an early intervention assessment-to-planning approach that sought to uncover, understand, and utilize the strategies families used to help their child learn and their appraisals of those strategies. Family responses during qualitative interviews were analyzed into three themes: 1) naturalistic observations yield naturalistic understandings, 2) practices that honor family strengths and family fit, and 3) self-discovery and self-affirmation. Implications for evolving family capacity-building approaches are discussed.

Keywords: disabilities, early intervention, family capacity-building, family-centered practices, natural environments, parenting beliefs, perspectives, qualitative research, self-efficacy, strengths-based interventions

Infants and toddlers (birth to three years) rely on their families for multiple learning opportunities throughout the day to practice functional competencies generalized across family routines. During these experiences, families frequently use learning strategies effectively individualized to their child's unique development (Bronfenbrenner, 1993; Dunst et al., 2012a). Home-based early intervention (EI) for families with infants/toddlers with delays or disabilities, as well as other home visiting programs, maximize their impact on positive child outcomes by focusing on families' effective use of learning strategies within everyday family life (Brown and Woods, 2015; Dunst et al., 2014a, 2014b; Innocenti et al., 2013; Khetani et al., 2013; Kong and Carta, 2013; Movahedazarhouligh, 2021; Ritland et al., 2020; Salisbury et al., 2018; Schertz and Horn, 2017).

Recommended practices of the National Association for the Education of Young Children (2020) and the Division for Early Childhood of the Council for Exceptional Children (2014) endorse the use of evidence-based strategies to adapt the environment, interact responsively, and teach intentionally. To support families, early childhood practitioners blend these evidence-based strategies and coaching practices into each family's individual culture so the strategies fit the family (Fenton et al., 2015; Harn et al., 2013; Keilty, 2017; Ledford and Wolery, 2013). Utilizing already-existing family strengths ensures strategies are embedded in the family's way of life, perspectives, and beliefs. Research has shown that affirming family strengths increases parenting sense of confidence and competence (Dunst, 2020; Fox, 2015; Schertz and Horn, 2017; Trivette et al., 2010). Positive self-efficacy, in turn, has been found to positively correlate to child learning outcomes and parent-child interaction (Albanese et al., 2019; Boyce et al., 2017; Dunst, 2020; Dunst et al., 2012b; Mas et al., 2019). Due to their child's unique learning needs, families in EI may feel less confident and competent in promoting their

child's development (Innocenti et al., 2013). In EI as well as all home visiting programs, focusing on family strengths around how they already help their child learn and develop is a means to promoting family confidence and competence.

Existing Family Strengths

Families come to early childhood programs with a history of thinking about and using learning strategies aligned to individual cultural expectations, child outcomes, and their child's unique developmental characteristics (Gallimore et al., 1993; Gallimore et al., 1989; Keilty and Galvin, 2006; McCalman et al., 2017; National Research Council, 2000). For example, Kellegrew (2000) found mothers of toddlers with disabilities adapted their self-care routines daily, based on their child's varying strengths and needs, while maintaining their personal childrearing styles and providing learning opportunities specific to their child's current goals. These strategies reflect the family's funds of knowledge, their understanding, skills, and intentions brought to EI (González et al., 2005). Research using a funds of knowledge perspective has expanded from knowledge derived from a family's cultural heritage to individual family strengths reflected in diverse samples, such as families who are homeless (Di Santo et al., 2016). Understanding (i.e., assessing) the strategies families used to make those adaptations and how they saw those strategies fitting their overarching individual culture, and specifically their parenting style and child learning goals, could inform individualized developmental intervention plans for the family as well as the child.

In an earlier study, Keilty and Galvin (2006) utilized case study research to explore the various adaptations a diverse sample of EI families made to promote their child's learning in everyday routines. Results found families used a range of 27-32 different social and physical adaptations during a 2- to 4-hour observation. This study also found families made very

conscious decisions about the learning strategies they chose to use – those they designed and those recommended by EI practitioners – according to their goals for and understanding of their child. Through observations and subsequent interviews, learning strategies were uncovered that the parents did not identify during a pre-observation interview, but had clear reasons for using once those strategies were brought to the family's attention. The data collection methods yielded rich information about each family's underlying desired outcomes for their child and the family's strengths and self-identified needs related to helping their child learn. The reasons that emerged from this discussion appeared to reflect the family's goals for their child, many of which were not necessarily identified prior to this discussion. During member check or participant validation procedures where research participants reviewed and provided feedback on the validity and utility of the findings (Ravitch and Carl, 2016), families reported the observation and discussion methods used in the research could be helpful in EI practices with families.

These findings suggest the need to further explore families' already existing contributions to child learning. Current EI practice recommends asking families what they do to help to their child learn (i.e., strategies). While this centers the conversation on family strengths, this approach may not be sufficient to fully discover all that families do to promote their child's development. Families may perceive many of the strategies they use as "simply" parenting and therefore may not share them as development promoting strategies when asked (Keilty and Galvin, 2006). Assessment methods that utilize authentic observations of parent-child interactions in everyday life provide the opportunity to understand *what* families are doing to help their child learn. Two recent intervention models utilized observation to identify and build on the strategies families use to help their child learn. The *Joint Attention Mediated Learning* (Schertz and Horn, 2017) intervention utilized video recordings of contextualized parent-child

interaction at the beginning of the intervention visit to focus on family strengths in promoting social communication outcomes in toddlers with autism. The *Embedded Practices and Intervention with Caregivers* (Salisbury et al., 2018) intervention also used short observations of parent-child interaction to identify family strengths as the basis for coaching four learning strategies – wait time, environmental arrangement, contingent responding, and prompting – to promote family-identified, short-term skills for children with moderate to severe disabilities. These interventions shifted home visiting practice to acknowledge and build on the strategies families are already using. However, these observations are viewed through the lens of professionally-expected strategies rather than the lens of the family. Uncovering the family's intentions and appraisals could result in practitioners obtaining a comprehensive understanding of the individual family's perspective and avoiding biased assumptions about the family, providing information on *why* they used those particular strategies. Therefore, a discussion situated in the variety of family strategies and "why they do what they do" could reveal priorities and desired goals for their child that might get lost in child-focused evaluations where current family strategy use is not fully explored. We posit that the family's contexts, motivations, and expectations, gleaned through deep exploration of the strategies a family chooses and uses, could contribute important formative information to plan goals and strategies tailored to the particular child and family.

Conceptual Framework

This research is situated in the family capacity-building framework to understand family conceptualizations of the strategies they use to help their child learn in order to plan goals and strategies that fit their individual family. Family capacity-building focuses on both relational practices – practitioner beliefs, attitudes, and approaches that create a trusting, collaborative

family-practitioner relationship – and participatory practices – behaviors that expect full family

engagement in decision-making over the course of intervention (Dunst and Espe-Sherwindt,

2016). Strengths-based interventions appreciate family strengths and then build on those

strengths by encouraging new family competencies to meet developmental goals (Boavida, 2014,

2016; Brown and Woods, 2016; Dunst et al., 2014b; Keilty, 2020; Kuhlthau et al., 2011;

LaForme Fiss et al., 2013; Palisano et al., 2012). Through this process, families are reinforced in

their ability to help their child learn, increasing parenting sense of confidence and competence

and, subsequently, quality parent-child interaction and positive child outcomes (Boyce et al.,

2017; Dunst et al., 2012b; Schertz and Horn, 2017; Trivette et al., 2012). The purpose of this

study was to inform assessment and planning practices by understanding families' perceptions of

deeply exploring one particular type of family strength, the strategies ("the what") they use to

promote their child's learning and development, including their thought processes ("the why")

around those strategies (Keilty, 2020; Keilty and Galvin, 2006).

Methods

This study was part of a larger research project piloting an assessment-to-planning

approach focusing on families' already existing learning strategies, including their reasons for

using them. Following participation in this approach, families were interviewed to understand

their thoughts on ways EI might further promote family confidence and competence. Both

universities' internal review boards on the protection of human research participants approved

this research. We adhered to ethical conduct throughout research implementation.

Positionality

We disclose our position as researchers and the particular topic under study to

acknowledge our biases that could contribute to the research decisions we made (Brantlinger et

al., 2005; Ravitch and Carl, 2016). We are white females and, as such, we have a perspective that does not represent all families' realities. We are early childhood special education professionals, with the first two authors situating their scholarship, professional development, and advocacy efforts on family capacity-building approaches. We see the assessment and planning approaches used in this study as a next step in evolving strengths-based interventions, building on but different from current strengths-based practices. We also value family perceptions and therefore wanted to understand whether these approaches matter to families. As described in the methods below, we built in reflexive approaches to minimize this subjectivity in data collection and analysis procedures to meet the study purpose (Brantlinger et al., 2005; Kozleski, 2017). Namely, to uncover the perspectives of study participants.

Participants

This study occurred in a large urban city and its surrounding suburbs. Inclusion criteria was defined as any family enrolled in EI and receiving EI home visits at the time of the study. Families were invited to participate through listservs of state and local family-led leadership and support organizations. The listservs were not solely for families in EI and therefore it is unknown how many eligible families the announcement reached. Interested families contacted us directly to learn more about the project.

Seven families – seven mothers and two fathers – participated in the interviews. The families were college educated and primarily white. All families were supported by a minimum of two EI disciplines (e.g., occupational therapy, physical therapy, speech-language pathology, special instruction), with at least weekly supports from each discipline. The families' Individualized Family Service Plans (IFSPs) were not collected nor directly asked about beyond the service data noted above. Three children were identified with Down syndrome. One child

was identified with a severe/profound hearing loss and used a cochlear implant. One child had

complex medical needs, including respiratory and feeding supports. Another child was identified

with motor and communication delays and seizure disorder. One child was eligible for EI due to

prematurity with feeding and motor delays. Table 1 summarizes family, child, and service

characteristics.

Home Visits Prior to the Interview

The families participated in three home visits, with the first author serving as

interventionist for this research, as part of alpha testing a potential assessment-to-planning

approach based on the case study research previously described (Keilty and Galvin, 2006). In the

first visit, the interventionist conducted a two-hour observation of parent-child interactions in

everyday contexts, which included but were not limited to routines. The interventionist asked the

family to "do what you normally do" which resulted in spontaneous, unplanned moments of

interaction, such as a back-and-forth running game between parents while one was cooking.

During this observation, the interventionist noted specific ways the family interacted with their

child (i.e., responsive interaction strategies) and physical environment features (i.e.,

arrangement, materials, adaptations), whether or not the interventionist thought the strategies

were effective for the particular child or the interventionist's perception of why the family was

using a specific strategy (Keilty, 2017; 2020). These observations allowed the interventionist to

see the actual context of families' lives and how they already help their children learn. With this

information, the interventionist could situate the discussion in the second visit by pointing out

strengths families may not realize they are doing.

In the second visit, the interventionist and family discussed the strategies observed to

understand the family's perceptions of those strategies. The interventionist started with the most

frequently used strategies observed, discussing each one with the family. Then, the interventionist used the family's comments to select the strategies to discuss next, assuring diversity across responsive interaction and physical environment strategies. For each of those strategies, the interventionist asked the family to describe (a) why the family chose the particular strategy, (b) how they came up with the strategy, and (c) how effective the family thought the strategy was in helping their child learn. During the third visit, the interventionist shared the family's authentic words and phrases from the discussion visit that seemed to reflect a potential priority. If the family agreed the words and phrases were a priority, the family then articulated a developmental goal. For each goal, the family and interventionist identified strategies that the family already used and that the family and interventionist thought were effective. These currently effective strategies were explicitly discussed and documented to give more weight to the ways the family already helped their child learn rather than prioritize strategies identified in planning. Then, the family and interventionist modified ("tweaked") other strategies already used by the family to increase effectiveness. Finally, the family and interventionist created new strategies if the family and interventionist identified a need for additional strategies for the stated goal.

Interview Procedures

To understand family perceptions of this experience, interview questions focused on how these home visits felt, the practicality and utility of the approach used in the home visits, what the family gained/learned by participating, and how the process might support the creation of individualized, strengths-based interventions. The first author conducted the interviews in a semi-structured manner, where preplanned, overarching questions were asked, while providing "leeway for following up" (Brinkmann, 2018: 579). This approach allowed family responses to

shape the direction of the interview. The first author encouraged families to provide honest

opinions, emphasizing their critical feedback was very important to the first author to understand

the value and utility of the assessment and planning visits, as well as ideas for further

development.

About one week after the third home visit, the first author conducted audio-recorded

phone interviews with the individual family, lasting 30-60 minutes. Telephone interviews were

selected to increase the flexibility of scheduling for families. It was expected that the distance

provided by telephone may also enhance honesty in responses. Rubin and Rubin (2012)

emphasized the importance of establishing face-to-face relationships with participants prior to

conducting interviews via telephone. The first author spent at least four hours over three visits

with the participants, which was expected to develop such a relationship. For the two families

where the mother and father participated in the interview, a joint call with both parents occurred.

In one family, both parents were on speaker phone together. For the other family, the first author

called each parent separately on their own cell phones and merged the calls. The first author

asked each question without identifying a particular parent to respond, allowing the family to

decide. After the first parent responded, if the other parent did not follow up with a comment, the

first author asked the other parent for their thoughts on the same question.

Data Analysis

Aligned with qualitative approaches, we utilized memo-ing after each interview to

document initial impressions of each participant's perspectives. Once all interviews were

completed, the audio-recordings were transcribed verbatim and analyzed using the constant

comparative method through an iterative process of data interpretation, disassembly, and

reassembly (Patton, 2015; Yin, 2016), using Excel spreadsheets. Initial interpretation occurred

when the first and second authors read all the transcripts and identified preliminary codes. Then, we disassembled each interview by creating individual data units that appeared to reflect a particular thought or idea. Each data unit was given a unit identifier, linked to the particular participant, and entered into a column in an Excel sheet for that participant. All data units were coded, including disconfirming evidence. To enhance reliability, the first and third authors independently coded each data unit (i.e., disassembly) for a subset of participants, and then compared codes for rigor and thoroughness, reconciling any disagreements. These coding procedures were then repeated with the remainder of the transcripts. After this first round of coding, the second author served as peer audit, identifying potential ways to revise the codes and collapse certain data units as an early reassembly step. Codes with no data units were removed. The above procedures were repeated for two more rounds, with data reinterpreted through the modified codes. Each round shifted the analysis from more concrete responses to the interview questions to a deeper integration of the data across interview questions (Patton, 2015). The first round codes were separated by each step of the assessment-to-planning approach, while the final round of codes merged the families' perspectives across steps and focused on the impact on family confidence and competence. The final interpretation resulted in situating codes within code categories and conceptual themes. Table 2 outlines the final codes, code categories, and themes.

These procedures were used to build trustworthiness in the methods and subsequent findings (Yin, 2016). This includes triangulation across participants and researchers with researchers taking on different roles, identification of disconfirming evidence, and multiple rounds of coding. These procedures were used to increase the likelihood findings would be meaningful to the early childhood field (Brantlinger et al., 2005; Patton, 2015; Yin, 2016).

Findings

Data analysis yielded three themes that could inform evolving early childhood assessment and planning approaches that are strengths-based and build family capacity. The resulting themes were: 1) naturalistic observations yield naturalistic understandings, 2) practices that honor family strengths and family fit, and 3) self-discovery and affirmation. Pseudonyms are used to attribute quotes to specific participants.

Naturalistic Observations Yield Naturalistic Understandings (Theme 1)

Families clearly articulated the importance of the researcher (serving as interventionist) observing their everyday interactions with their child as a means to understanding their family and how they chose to support their child's learning and development. They valued the interventionist's developmental expertise including identifying the strategies the families used, and appreciated an outside perspective. The families saw the observation as critical to the interventionist understanding their unique family and ways of interacting. As such, families were thoughtful in assuring the observations provided a realistic depiction of their family, and even wanted the interventionist to observer more times of their day.

Families intentionally scheduled the observation home visit and interacted with their child as naturalistically as possible so the observer could get a true "slice of life" [Paul]. Peggy stated:

Making sure that I was able to get you in a time when there was a lot of different activities in the house would be important.

Trudy connected how she interacted to her hopes for professional support:

> I honestly tried to be as realistic with what everyday life is like because I wanted a true
> picture. I wanted to get information and I wanted to get feedback, so I was trying to do
> what we do every day just so that it would be more truthful.

Families intuitively recognized their child's learning and development occurred within these everyday interactions and saw the observation as an opportunity for the professional to gain "more insight into what's happening…what your habits and patterns are" [Peggy].

Families identified two benefits the interventionist as a professional brought to this unique type of naturalistic observation. One benefit was the professional's positioning outside the everyday interactions ("outside looking in" [Aaron]). Families recognized that "somebody else's perspective" [Trudy] would be different from the family's own proximal view as the interactors and designers of their child's experiences. The other benefit was the developmental expertise brought by the professional, someone "who studied it [and] who have guidance and …the types of tools to really help us" [Aaron].

While we were wondering if the length of the observation would be too long for families, all families valued the observation. In fact, they thought one, 2-hour observation was insufficient, as it was only "a small window" [Aaron] of their day. They felt it was essential for the professional to see more or more varied interactions. They recognized their interactions look different with different people and activities happening. Trudy explained that:

> different times of day, different days of the week, because everybody's schedule varies so
> much…. would give you a broader picture of the whole family situation.

Families noted various reasons their days and times could look different, such as the individuals at home (e.g., weekends versus weekdays, evenings versus during the day) and the activities that occur prior to the visit (e.g., days the child goes to center-based services versus home all day),

which changes the interactions and, subsequently, the strategies used. Families suggested

observing "maybe an hour, three times a week" [Trudy] and "maybe two to three different

sessions across different times" [Peggy]. Families thought it important for EI practitioners to see

that variability so planning truly fits their family throughout the day and across the week.

Practices that Honor Family Strengths and Family Fit (Theme 2)

Families clearly valued putting family strengths at the forefront of assessment and

planning. Families attributed the goodness of fit of the resulting plan, most particularly the

strategies, to the way the families were involved. They demonstrated this value by sharing their

study experiences with their current professional supports.

In the larger pilot research, the family and interventionist designed a developmental plan

of goals and strategies by using the families' observed and articulated strengths gleaned from the

rich observation of diverse interactions and the subsequent discussion. During the observation,

the interventionist discovered strategies the family was utilizing that could help their child learn

(i.e., strengths). In the next visit, the family and interventionist explored those strategies to reveal

the family's perceptions of why they used the strategies and how successful they thought the

strategy was in accomplishing those priorities. The family's own words from this conversation

were used to develop goals and identify strategies the family was already using to meet those

goals as well as any new strategies. Families saw fundamental differences in this process and the

resulting product compared to their IFSP experience and other times in EI when strategies were

identified.

Families felt this collaborative planning process, based on their intentions and how they

chose to support their child's learning, facilitated clarity among all team members, resulting in

both family and professional being "on the same page and… working towards the same goals"

[Monica]. Trudy described this result as follows:

> I felt like we were more connected in the process [than IFSP development] because I
>
> understood why we were making the goals we were making. We actually made them
>
> together so we were involved in it…. It was written in a way that makes sense to me
>
> cause we wrote it together.

In terms of product (i.e., developmental plan), families identified particular

characteristics of the resulting strategies that evidenced truly "fitting" their family, again

frequently comparing them to strategies derived in EI. Families appreciated the strategies

specifically referenced the way they were observed using them rather than generic strategies

("more concrete… a little more straight to the point and easier" [Nicole]). Families also valued

the limited number of new strategies ("…it was only a couple of strategies. So, it wasn't

overwhelming…and it was easy to implement" [Lynn]) and how naturalistic the strategies felt

("feel[s] more comfortable… more of a flow for the parent and not something… like work"

[Trudy]). As Ava described:

> We want to work on things everyday with him that are not always necessarily
>
> educationally based. You know, more play or practical [things] in the home…. So, I think
>
> that… [this process is] really beneficial in regards to that.

Families thought identifying their already existing strategies and then sharing their

intentions and appraisals of those strategies would help EI practitioners have a better

understanding of their true priorities and ways they interact to meet those priorities across their

days and weeks. As Paul described:

The most valuable part is seeing what we are doing and talking about how what we're

doing is engaging the different things that we want [for our child]… For…

interventionists to have insight into what we are doing outside of [EI].

Families similarly appreciated how family strengths were intentionally at the forefront

when developing the plan. They thought the approach explicitly illustrated that the family is the

expert of their child ("This really shows that the family knows the child" [Ava]). Trudy

described how this approach, while perhaps subtly different from current EI practices, felt quite

different to families:

To say to [families], 'you're doing this already. We just need to do X, Y, and Z.' That's

probably not as overwhelming as telling, 'Well, you're doing it all wrong and you need to

do this.'

Families demonstrated their perceived value of the approach by sharing the plan with

their current professionals. Four families shared or expected to share the developmental plan

with their EI practitioners and/or other developmental partners, such as hospital clinics and

private therapies. Peggy was going to utilize the plan at an upcoming IFSP meeting as she now

had the "language around what I wanted to say" and being able to say it "more eloquently is

helpful." Families valued taking time to understand family strengths in promoting their child's

learning and collaboratively applying that understanding to planning, resulting in child-focused

learning strategies that fit their family and discovering more about themselves as parents.

Self-Discovery and Self-Affirmation (Theme 3)

Families described how they learned more about how they wanted to be a parent -- what

they valued for their child's learning and how they wanted to help meet those priorities. Families

appreciated how their priorities were uncovered and more concrete, which resulted in

reconsidering their current IFSP goals. Families felt affirmed in their parenting since the focus

was on current strategies – those already effective and those tweaked with the interventionist –

while continuing to value new strategies developed. By validating their current strategies and

their understanding of their own child, as well as affirming their family's competence, families'

self-confidence was enhanced.

Families valued the conversations and the time in between the conversations as space to

reflect on and uncover their thoughts and feelings. They realized their priorities and reciprocally,

how what they "do" inherently reflects those priorities. Paul described it as, "connect[ing] the

dots… to verbalize the thinking that's behind what we're doing." Families felt they were able to

make their underlying priorities more concrete ("take things that we had in our minds and

actually put it out" [Aaron]). These conversations and time to reflect sometimes resulted in

different priorities from their current IFSP outcomes. For example, Trudy shared how the

conversation and time between the discussion and planning visits shifted her thinking about the

current IFSP outcome of vocabulary acquisition:

> When I sat back and thought about it, I was like, 'You know what, I don't need to focus
>
> on vocabulary' …. So actually, it kind of made me realize that maybe one of the goals I
>
> had for him was already met so we needed to… zone in on what's really important now.

For Trudy, the priorities that emerged concentrated on listening, engaging, attending, and

reducing frustration in communicating.

Families saw the approach of uncovering the strategies they were already using – the

effective ones and those that could be modified – as well as learning about possible new

strategies, affirmed their parenting role as developmental promoter. Identifying and discussing

currently effective strategies resulted in families "discover[ing] that, serendipitously, and

intentionally or not, we were doing things to strategically make that happen" [Paul]. Monica described this linkage as "draw[ing] attention to things that we're doing… reassured that we are helping." Families also appreciated ways to modify or "tweak" strategies as a way to further support child learning with minimal changes to their interactions ("adjust things accordingly to make them more efficient or helpful" [Connie]). Trudy explained, "You're still doing the same types of things. It's how you're approaching it, and sometimes that makes all the difference." For example, Trudy was already preparing her child for a transition by verbalizing that a change was about to occur. This strategy was modified by adding a "two-minute warning" and then again right before the transition.

Families valued identifying new strategies they could choose to use. As described earlier, families saw the new strategies as clearly connected to their priorities and easy to "fit" their current interactions ("It doesn't have to be very structured. That's what I like about it and we've been implementing them" [Lynn]). Many families already started using the new strategies between the last home visit and the interview. For example, Ava described using the new strategy of wait time and connected it to their stated priority of their child expressing what he wants, "We're slowing down a little bit… to make sure he's understanding and given the opportunity to speak to us or express himself to us." Families not only discovered clarity in their priorities but how the strategies they used help them meet those priorities. Families also felt a sense of confidence as a parent.

While not specifically using the term *confidence,* families' words and phrases reflected a boost in confidence in helping their child learn. They felt validated that "perhaps our instincts are pretty good" [Paul] and "what I'm doing is working" [Connie]. Families connected currently-

used strategies as affirmation they understood their individual child. Trudy described the

importance of being able to read her child:

> That means I… understand what he needs and therefore helping him to achieve those
>
> goals or whatever he's looking to do. So that was a big component for me.

Families were frequently unaware of all the strategies they were indeed using. This discovery

positively affected their self-confidence. Ava described this as follows:

> It was… enlightening as to what it is that we do to try to help him… without realizing
>
> it…. The interview process is good for families because they'll learn that, regardless of
>
> what they think they're doing, they are doing something to help… their child.
>
> Families saw the professional affirming their current competencies, through "positive

feedback" [Monica] and "point[ing] out things…I wasn't even aware I was doing" [Trudy] as

important. Nicole connected the importance of professional affirmation to family confidence:

> When you have a special needs kid, you're always wondering, "Am I doing the right
>
> thing or am I not doing it right?" So, I think all the reinforcement was really good for us
>
> to hear and, with you being in the field that is very encouraging.

Discussion

Strengths-based interventions recognize the home context is not a blank slate. Instead,

everyday interactions are comprised of strategies individual families use to help their child learn,

reflective of their culture and desired developmental outcomes. Acknowledging and building off

already existing strategies (i.e., strengths) enhances parenting sense of confidence and

competence (Schertz and Horn, 2017). Positive self-efficacy correlates to better child outcomes

and parent-child interaction (Albanese et al., 2019; Boyce et al., 2017; Dunst, 2020; Mas et al.,

2019; Trivette et al., 2010). This study's assessment-to-planning approach grew out of current

strengths-based practices and contends that already existing family strengths are the genuine

intervention. This approach was designed to evolve strengths-based and capacity-building practices. The findings are discussed with that lens.

This exploratory study sought to inform assessment and planning practices by explicitly using families' existing contributions to child learning and their thinking (i.e., intentions and appraisals) behind those contributions (Keilty, 2017). While the differences between the approach discussed here and current expected practices may appear subtle, participating families clearly saw a difference and valued those differences, frequently comparing the approach to their current early childhood intervention supports. These small changes in practice may make big differences in families' parenting confidence and competence.

Families were intentional in scheduling the naturalistic observations and interacting as naturally as possible so the interventionist could see how their real life unfolds. They even recommended more time observing, and at more diverse times, than the one 2-hour observation. Current recommended and common early childhood intervention practices utilize authentic observations to ascertain child functioning. In the approach used in this study, the naturalistic observations focused on family interactions and family-designed environmental features. It may be that centering the observation on "what the adult is doing" validated for families the importance of professionals understanding their family strengths and further cementing the family as the primary developmental promoter of their child's learning. Future research could examine how this shift in focus, while continuing to assess child development within the context of what the adult is doing, impacts family understanding, appreciation, and participation in assessment, planning, and continuing intervention.

Families clearly saw the importance of professionals fully understanding and honoring their everyday experiences and the strategies used within those experiences, including why

families used particular strategies. Families noted that the discussion visit encouraged more family participation in development and ownership of goals and strategies in comparison to their EI visits. In this study, the conversation as well as time in between visits encouraged families to *think aloud*, resulting in clarity for the families regarding their goals, their use of already effective strategies, and where new strategies would be of use. During this conversation, the interventionist facilitated the families' revealing of goals and strategies by identifying strategies observed and asking about the family's intentions and appraisals of those strategies. Asking families a wide-ranging question of what their goals/outcomes are for their child may be insufficient for assuring priorities and goals/outcomes truly reflect the individual family's thinking and feeling. They may be unsure what these priorities or outcomes can entail. They may feel like professionals are seeking "correct" answers or their responses may be influenced by their experiences with professionals, such as the results of developmental assessments, which may confound the family's perspectives. Future research can explore how digging deeper into understanding the family's perspectives around "what they already do" impacts how well the planning process and developmental plan truly aligns to family priorities and resulting strategies fit the family.

Participating families found the approach facilitated self-discovery and boosted their confidence and competence in relation to the parenting role of helping their children learn. Families described their goals, in their own words, without professional editing. The strategies families used were not only identified, but explored and explicitly applied in planning. This included documenting both those currently effective strategies - therefore not needing any professional input - and those strategies that with simple modifications could be more effective. This approach shifts the professional role to making space for families to affirm their already

existing family strengths as intervention and modifying current strategies if needed, according to the family's appraisal of the strategy. This shift evolves family capacity-building approaches from acknowledging family strengths to giving agency to families through explicit focus on those strengths that currently exist. Future research can identify and compare these nuances in practice to determine how they may make a difference in family confidence and competence.

Study Limitations

Two limitations of this study are recognized. First, the family sample lacked socio-economic, educational, and cultural diversity. It is unknown if the same findings would hold for a more diverse sample. For example, the procedures may seem intrusive to another, more diverse sample of families. Future research can utilize intentional recruitment approaches to examine differences in perspectives. A second limitation is that no data were collected on what EI services looked like for the families. It is unknown how families' prior EI experiences have influenced their strategies, intentions, and perceptions of effectiveness. It is also unknown how aligned the practices of the families' EI professionals were to currently expected practices. Future comparison research with families new to EI, and video recording EI home visits, could provide such evidence.

Conclusion

This study investigated family perceptions of assessment and planning practices that deeply explore family strengths in child learning. The findings suggest next generation practices in family capacity-building should be studied to continue to evolve strengths-based approaches to further promote family confidence and competence in their parenting role as the primary influences on their children's learning.

Declaration of Conflicting Interest

We have no known conflicts of interest to disclose.

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Table 1

Demographic and Service Information for Participants (n = 7)

	(n)		(n)
Family Characteristics		**Child Characteristics**	
Mother's Age		Gender	
25-34	2	Male	4
35-44	5	Female	3
Mother's Race, Ethnicity		Current Age	
White, Non-Hispanic	5	12-16.5 months	3
White, Hispanic	1	30-34 months	4
Black, Non-Hispanic	1	Child's Race, Ethnicity	
Mother's Education Level		White, Non-Hispanic	4
Bachelor's Degree	5	White, Hispanic	2
Post-Bachelor's Degree	1	Black, Non-Hispanic	1
Doctoral Degree	1	Child Birth Order	
Annual Household Income		Only child	2
$50,000 - $74,999	1	Youngest of two	3
$75,000 - $99,999	1	Youngest of three or more	2
$100,000 or Over	5	EI Eligibility	
		Down syndrome	3
EI Services (Home)[a]		Severe to profound sensory neural	
Physical Therapy (1-3 hrs/wk)	6	hearing loss	1
Speech-Language Therapy (1-3 hrs/wk)	6	Complex medical needs	1
Special Instruction (1/2-2 hrs/wk)	4	Gross motor and communication	
Occupational Therapy (1-2 hrs/wk)	4	Delays	1
Teacher of the Deaf (1.5 hrs/wk)	1	Premature birth, feeding and	
		physical development	1
Outside EI Services [a]		Child's Age of EI Onset	
Center-based services (4 hours/week)	1	6 months or younger	5
Nursing (20 hours per day)	1	8 months	1
		22 months	1

[a]Families indicated more than one type of service.

Table 2

Codes, Code Categories, and Themes (n=7 families; 7 mothers, 2 fathers)

Codes	Categories	Themes
"Outside Looking In" Professional Expertise Identifying Family Strategies	Professional as Observer	
		Naturalistic Observations Yield Naturalistic Understandings
Realistic Depiction/"Slice of Life" Ways of Interacting More and Varied Interactions	Observation to Understand Family	
Process of Plan Development Strategies that Fit	"We Actually Made Them Together"	
		Practices that Honor Family Strengths and Family Fit
Family Strengths at the Forefront Sharing with Others	Assessment and Planning Value	
Making Priorities More Concrete Shifted Thinking About IFSP Goals	Uncovering Priorities	
Already Existing Strategies (Current and Modified) Value of New Strategies	Strategies that Affirm Parenting	*Self-Discovery and Self-Affirmation*
Validating Current Strategies Knowing Their Child Family Affirmation	Developing Self-Confidence	