

# Check Your Judgment

## Reframing Techniques to Support Strengths-Based Approaches to Family-Centered Practices

CORINNE FOLEY HILL  
*Virginia Commonwealth University*

JENNIFER RYAN NEWTON  
*Saint Louis University*

MIRA COLE WILLIAMS  
*James Madison University*

**A**LL FAMILIES LOVE THEIR CHILDREN AND WANT WHAT IS BEST FOR them. This core belief provides the basic tenet of family-centered practices. In supporting both preservice and inservice early childhood educators and practitioners, there is often the assumption that all practitioners hold this same value. Yet often during a college course or professional development experience, a participant shares, “Yes, but I know this family that honestly just doesn’t care about their child. They never check backpack mail, never come to conferences, and their kid is always overly tired and late.” Quickly, these perceptions (or misperceptions) challenge the strengths-based belief that families are doing the best they can within their unique circumstances and situations. How we respond will reinforce the widely held biases, will shame or diminish the courageous practitioner who gave voice to what others were thinking, or will provide opportunity for reframing.

Reframing, or “cognitive restructuring” as it is referred to in psychology (Beck, 1997), is a technique that changes the way something is expressed to communicate the idea from an alternative perspective. The participant in this scenario provides the opportunity, through guided practice and self-reflection, to reframe the belief that the stated evidence (i.e., late to school, not attending conferences) does not prove the family does not care but possibly that the family is not finding value in the experiences the school provides. This subtle but meaningful reframing shifts the responsibility from the family to the professional to take a more in-depth look at the family’s priorities, values, and needs.

The Division for Early Childhood (DEC) Recommended Practices (2014) identifies family-centered practices as strategies, applications, and interactions



We must tackle the challenge of biases and beliefs widely held by preservice and inservice professionals that limit the ability to truly honor and support individual family priorities, structures, or values.

that “treat families with dignity and respect; are individualized, flexible, and responsive to each family’s unique circumstances; provide family members complete and unbiased information to make informed decisions; and involve family members in acting on choices to strengthen child, parent, and family functioning” (p. 10).

To do this well, we must tackle the challenge of biases and beliefs widely held by preservice and inservice professionals that limit the ability to truly honor and support individual family priorities, structures, or values. Reframing could provide an additional resource in the toolbox that teacher educators and professional development providers use to move practitioners forward in their implementation of the DEC Recommended Practices. Reframing could also be used to support practitioner self-reflection of their beliefs and possible biases.

We focus on four specific Family recommended practices below and provide evidence-based research related to these practices along with vignettes and reframing examples for each practice. Each vignette and reframing component draws attention to the importance of research related to family-centered practices while also providing examples to assist teacher educators, professional development providers, and practitioners in deepening their understanding of families and their ability to participate in judgment-free interactions with the families with whom they partner. *Practitioner* is used throughout to encompass preservice and inservice home-based and classroom-based early childhood service providers.

**F1. Practitioners build trusting and respectful partnerships with the family through interactions that are sensitive and responsive to cultural, linguistic, and socioeconomic diversity.** Practitioners frequently hold negative and preconceived biases against families whose cultural and interaction styles vary widely from their family of origin (Kim & Taylor, 2017). Perhaps without even being cognizant of these preconceptions, practitioners may compare and use their personal experiences, including child-rearing practices, as the standard of correctness. When a family deviates from these expectations, it may challenge the practitioner’s capacity to “build trusting and respectful partnerships.”

### Scenario 1

*We drove up to the trailer home, and a woman answered the door. She said she was sleeping and did not know we were coming. She did not seem ready for us, but she invited us in. We walked into a dark and smoky living area, and she turned on a light as she invited us to sit on the couch. The woman then quickly pointed to an urn on top of the mantle and told us that it was her late husband. She proceeded to talk about her family. Apparently, the child is bounced around from home to home, and she is his grandmother but has custody. I was sad to see a home full of smoke, without books or toys, and clearly not a lot of stability.*

All early childhood practitioners would agree that second-hand smoke is a health hazard for young children. Additionally, they would concur that opportunities to interact with books and toys provide young children with play and early

literacy experiences. Finally, practitioners recognize that children's social-emotional well-being is enhanced when they are exposed to consistent and stable environments with caregivers who support development. However, having this knowledge may cause practitioners to quickly focus on the negative aspects of this family.

### **Reframing 1**

*We drove up to the trailer home, and a woman answered the door. She appeared to be surprised that we were there for our visit but invited us in to the living room, which had electricity and was well-heated. The woman shared that her husband had recently died, and she showed us an urn that held a place of honor in the home. She shared information about her family, including that she was the child's custodial grandmother. It was clear that although the woman admitted this was not her original plan, the child appeared well-fed, clean, and attached to his grandmother.*

Taking the time to listen openly helps practitioners recognize that although the child's environment could be enriched, there were many positive aspects of this family's life. Maximizing those positive aspects creates opportunity to build capacity in families through true partnership.

### **F3. Practitioners are responsive to the family's concerns, priorities, and changing life circumstances.**

Learning to balance family concerns and priorities related to their children's development with professional knowledge and expertise can be complex because it involves a set of dynamic processes (Deal, Dunst, & Trivette, 1989). The parents' goal may be for their child to learn to walk, but the physical therapist may have concerns that this may not be attainable. Another family may consistently struggle to pay the rent while the practitioner believes the family could remedy current financial difficulties by making different choices. Building capacity in practitioners to appreciate that families are entitled to their hopes and dreams for their children requires a judgment-free partnership with an emphasis on family-identified needs (Dunst & Trivette, 2009). To be truly family-centered, practitioners must recognize families have the right, without judgment, to make lifestyle choices and mistakes.



### **Scenario 2**

*When I got to the apartment, the mother told me that she was out of diapers and had only enough formula for one more bottle. I was frustrated because of the huge*

*television and a pair of tennis shoes that I know cost more money than I could afford. It made me wonder about the choices this mother was making.*

It is easy to form opinions based on observation without context. Teaching practitioners to set aside their initial assessment and probe more deeply to support the family using a coaching interaction style (Rush & Shelden, 2011) provides opportunity to modify the original opinions with fact-based context. By asking solution-focused questions, practitioners can better understand the context in which families operate.

### **Reframing 2**

*When I got to the apartment, the mother told me that she was out of diapers and had only enough formula for one more bottle. I asked the mother what her plans were to find diapers and formula. She shared that her boyfriend managed all the finances and only gave her \$20 a week. She was afraid to ask for more because he quickly became angry and threatened to kick her and the baby out.*



Despite the initial impression, understanding the current life circumstances helps practitioners see that the mother's priority was her child and his immediate basic needs. Using this lens, practitioners are enabled to support families using judgment-free coaching strategies.

### **F5. Practitioners support family functioning, promote family**

#### **confidence and competence, and strengthen family-child relationships by acting in ways that recognize and build on family strengths and capacities.**

An emphasis on family-centered practices is increasing in teacher preparation programs (Hiatt-Michael, 2001; Zygmunt-Fillwalk, 2006); however, many practitioners still view themselves as the expert whose job it is to identify what is wrong with the child or determine the child's needs and then "fix the problem." Practitioners may blame families when the "fix" doesn't happen or when families behave differently than practitioners expect. Prioritizing the relationship between provider and family with the goal of increasing family members' understanding and knowledge to support their children's development requires a shift and role release for many practitioners (Childress, 2014). Practitioners must move from expert to partner because effectively collaborating with families hinges on a strengths-based approach to capacity building.

### Scenario 3

*Lilly will never know all of her letters. Her parents are so uninvolved. I just don't understand how a parent could not show up to any school events and then be upset with me because people are trying to help their child. I have two children, and I have always been grateful when a teacher offered help for my child.*

When parents are perceived as uninvolved in early childhood settings, there is often an assumption that parents do not care or are not invested in forming a relationship with their child's school or teacher. However, by reframing, practitioners may be able to view "lack of involvement" differently and empower themselves to seek different ways to increase family engagement and focus on family strengths (Dunst & Trivette, 2009; McAllister, Green, Terry, Herman, & Mulvey, 2003) and capacities.

### Reframing 3

*Lilly needs some academic support, and I really want to engage her parents. I learned recently that her family is living in a homeless shelter after her dad left and her mom had to quit her evening job so someone could be with the kids at night. After talking to the mother, I learned so much about the challenges they are facing, and I asked how I could support Lilly more at school and what would be helpful for their family right now. I found out that Lilly's mom can't read but loves telling stories at home. She really wants to come to parent nights to help Lilly at home, but she has no transportation and three other small children at home. She also indicated that she feels embarrassed asking for help. Despite my initial impression, I learned that Lilly's mom is devoted and loving. I talked with her about the benefits of her storytelling and will continue to find ways to build on this strength. I am talking with my supervisor about finding ways to help transport parents to school events, and I also let Lilly's mother know that we welcome siblings and always have child care.*

Engaging families in judgment-free conversations assists practitioners in recognizing family functioning styles. This open interaction lays the groundwork to appreciate family strengths, which builds the collaborative relationships between professionals and families.

**F6. Practitioners engage the family in opportunities that support and strengthen parenting knowledge and skills and parenting competence and confidence in ways that are flexible, individualized, and tailored to the family's preferences.** Every family's knowledge of their child's development is compounded by the multifaceted impact of culture, economics, and education. Differing beliefs, skills, values, and traditions influence family preferences and ideology (Seligman & Darling, 2007). These ideologies often shift over time and with different life circumstances. Practitioners must be flexible and willing to understand, support, and shift with the family, recognizing that readiness for capacity building must be individualized and incremental (Dunst & Trivette, 2009).

“

Engaging families in judgment-free conversations assists practitioners in recognizing family functioning styles. This open interaction lays the groundwork to appreciate family strengths.

**Table 1**  
Family-Centered Reframing

Statement	Possible reframing response
They don't try very hard	<ul style="list-style-type: none"> <li>• They are content with what they have</li> <li>• They may need support to learn how to do new or different things</li> </ul>
They have too many kids	<ul style="list-style-type: none"> <li>• Their children bring them pleasure and joy</li> <li>• They value a large family</li> </ul>
They are always looking for others to solve their problems	<ul style="list-style-type: none"> <li>• They appreciate help that others can offer them</li> <li>• They are willing to take needed help</li> </ul>
They are lazy	<ul style="list-style-type: none"> <li>• They know how to relax</li> <li>• They strive to not overcommit their time</li> </ul>
They don't want to learn English	<ul style="list-style-type: none"> <li>• They value their native language</li> <li>• It is important to them that their children speak their native language</li> </ul>
They look down on women	<ul style="list-style-type: none"> <li>• Their culture holds men in high regard</li> <li>• Their family believes that men and women have specific roles and responsibilities</li> </ul>
They spend money foolishly	<ul style="list-style-type: none"> <li>• They have different priorities about material possessions that are important to them</li> <li>• They enjoy having fun with the money they have</li> </ul>
They are never on time	<ul style="list-style-type: none"> <li>• They are not driven by clocks and calendars</li> <li>• Their culture views timeliness differently than other cultures</li> </ul>

From "Effective Partnerships: Cultural Competence," by Partnership for People With Disabilities, 2002, *Kaleidoscope: New Perspectives in Service Coordination*, 3, p. 9. Copyright 2002 by Partnership for People With Disabilities. Adapted with permission.

#### Scenario 4

*I'm so frustrated with this family right now. They are so inflexible and insist that all of our visits happen in the afternoon because they don't like to wake up early. I think they go to parties a lot. Their son, Raphael, really needs services, but by the time I get there in the afternoon it seems like he is tired and ready for a nap, even though his mom insists that he just recently woke up. They live in a huge house, and I know they have a lot of resources, but they just prefer to focus on their adult lives rather than their child.*

To "support and strengthen parenting knowledge in ways that are flexible, individualized, and tailored to the family's preferences," we must focus on respecting the varied family systems, roles, and cultural backgrounds while empowering families with knowledge and opportunities for involvement (Edwards & Da Fonte, 2012). Recognizing that families know their child and their lifestyle best reminds practitioners to honor families' priorities for their children.

#### Reframing 4

*I'm so excited! I just learned that Raphael's dad plays in a local band that is gaining in popularity. They spend special family time going to hear the father's "gigs," which sometimes end late at night, but I love that he gets to support his dad. Now, I understand why Raphael's mother lets him sleep in later many days. Even though concerts don't happen every day, I appreciate her recognition that maintaining a consistent schedule is important for Raphael. The mother told me that meeting a little later in the afternoon would benefit them greatly. I am going to change my hours around so that I can accommodate and support this family's preferences and needs.*

Families make certain parenting and lifestyle decisions based on their priorities. Practitioners are, therefore, tasked to allow themselves to be open to each family's priorities without asserting their personal biases and beliefs.

These vignettes illustrate examples of possible biases and beliefs that practitioners may hold. Reframing, an instructional tool used in supporting practitioners as they consider their personal biases related to family choices, priorities, and lifestyles, can be powerful in shifting to a strengths-based approach of family-centered practices. Used in college preparation courses as well as in professional development, participants are provided with a set of judgment-laden, biased statements about families. Facilitators then lead a discussion encouraging reframing the statements using a family-centered, strengths-based lens. After practitioners have experienced facilitated reframing, they may learn to use it as a tool for self-reflection. See Table 1 for examples of these reframed responses to common deficit statements.

While not a comprehensive list, Table 1 addresses some frequently cited biases practitioners may articulate. The vignettes illustrate common experiences that practitioners may encounter. Recognizing these biases and viewing experiences as opportunities, rather than as challenges, supports practitioners to shift their mindset. This is a first step toward effective, more meaningful, more individualized, and more rewarding partnerships on behalf of young children. Effective family-centered practices begin with the professionals. Reframing exercises can build capacity in practitioners to honor family preferences and work collaboratively toward the common goal of supporting the child's full participation in everyday routines and activities.

## References

- Beck, A. T. (1997). The past and the future of cognitive therapy. *Journal of Psychotherapy Practice and Research*, 6, 276–284.
- Childress, D. (2014, March 11). Letting it go: Role release and why it can be hard [Blog post]. Retrieved from <http://veipd.org/earlyintervention/2014/03/11/letting-it-go-role-release-and-why-it-can-be-hard/>
- Deal, A. G., Dunst, C. J., & Trivette, C.M. (1989). A flexible and functional approach to developing Individualized Family Support Plans. *Infants and Young Children*, 1(4), 32–43.
- Division for Early Childhood. (2014). *DEC recommended practices in early intervention/early childhood special education 2014*. Retrieved from <http://www.dec-sped.org/recommendedpractices>
- Dunst, C. J., & Trivette, C. M. (2009). Capacity-building family-systems intervention practices. *Journal of Family Social Work*, 12, 119–143. doi:10.1080/10522150802713322
- Edwards C. C., & Da Fonte, A. (2012). The 5-point plan: Fostering successful partnerships with families of students with disabilities. *Teaching Exceptional Children*, 44(3), 6–13. doi:10.1177/004005991204400301
- Hiatt-Michael, D. (2001). *Preparing teachers to work with parents*. New York, NY: ERIC Clearinghouse on Teaching and Teacher Education. (ERIC No: ED460123)
- Kim, K. J., & Taylor, L. K. (2017). Preservice teachers' self-efficacy in working with families: Can an immersive course make a difference? In J. A. Sutterby



Recognizing that families know their child and their lifestyle best reminds practitioners to honor families' priorities for their children.

- (Ed.), *Family involvement in early education and child care* (pp. 1–22). Bingley, England: Emerald Group.
- McAllister, C. L., Green, B. L., Terry, M. A., Herman, V., & Mulvey, L. (2003). Parents, practitioners, and researchers: Community-based participatory research with Early Head Start. *The American Journal of Public Health, 93*, 1672–1679.
- Partnership for People With Disabilities. (2002). *Kaleidoscope: New perspectives in service coordination*. Richmond, VA: Author.
- Rush, D. D., & Shelden, M. L. (2011). *The early childhood coaching handbook*. Baltimore, MD: Paul H. Brookes.
- Seligman, M., & Darling, R. B. (2007). *Ordinary families, special children: A systems approach to childhood disability* (3rd ed.). New York, NY: Guilford Press.
- Zygmunt-Fillwalk, E. M. (2006). The difference a course can make: Preservice teachers' perceptions of efficacy in working with families. *Journal of Early Childhood Teacher Education, 27*, 327–342. doi:10.1080/10901020600996026