

# What About MY TOYS? Common Questions About Using a Bagless Approach in Early Intervention

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Family members should not have to rely on a provider’s bag of toys to be the agent of change for their child.  
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*Lauren is an early interventionist with 5 years of experience with birth to 3-year olds. She recently started a new job working in an early intervention (EI) program. Lauren quickly noticed that her colleagues in the agency did not bring toys with them to their in-home intervention sessions. She began to question why her colleagues were not bringing in toy bags and wondered how they were interacting with the children and meeting their individual goals without a variety of toys. When she discussed her concerns with her supervisor, Lauren learned that this program emphasized the use of “bagless” intervention. Understanding “bagless” intervention was important to Lauren because she wanted to adhere to the program’s philosophy while also staying current on early childhood practices to ensure she was providing the best services for families.*

Bagless intervention is a term used by professionals to describe EI services in which the provider refrains from bringing a bag of toys into the home for sessions. Instead of using a toy bag to work on child outcomes, the service provider uses materials in the child’s home, as well as family routines, to address the developmental outcomes that each family has for their child. Bagless intervention has become a recommended practice, replacing more traditional methods of therapy

in which practitioners bring toys into homes to work on specific outcomes outlined on the Individualized Family Service Plan (IFSP).

According to the Division for Early Childhood of the Council for Exceptional Children’s (DEC) Position Statement on Special Instructors, interventions should occur within the context of child and family routines (DEC, 2014a). Toy bags brought by early interventionists are not part of the daily routine, and therefore, should not be used as the primary source of instruction for children and families. When professionals bring bags of toys into homes and then take them away after sessions, family members do not necessarily learn how to support a child’s development. DEC recommended practices suggest that instruction should be contextually relevant to families, which helps strengthen their feelings of competence and self-efficacy (DEC, 2014b). Family members should not have to rely on a provider’s bag of toys to be the agent of change for their child, but should instead be provided with the tools and skills they need to promote their child’s development.

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The Workgroup on Principles and Practices in Natural Environments, OSEP TA Community of Practice: Part C Settings (2008) described what the EI principles look like, as well as what they do not look like in practice. For instance, the first principle is, “Infants and toddlers learn best through everyday experiences and interactions with familiar people in familiar contexts” (Workgroup on Principles and Practices in Natural Environments, OSEP TA Community of Practice: Part C Settings, 2008, p. 2). The Workgroup explicitly states that toys and materials should be from the home and/or community setting in which the session takes place, not brought in by professionals. It also states that professionals should assist families in understanding how to use and adapt their own toys and other materials to promote children’s development.

The purpose of this article is to share information about bagless intervention based on the EI principles, using a question and answer format. Answers include references to research and position papers in the field of early childhood special education. Bagless intervention can be used by all EI professionals including special instructors, physical therapists, occupational therapists, and speech and language pathologists.

## What Does Bagless Intervention Look Like and Why Should I Practice It?

EI services, as outlined in Part C of the Individuals with Disabilities Education Act, are required to occur

in natural environments such as homes or other community settings. Recommended practice in EI not only includes the physical environment, but also the materials used during sessions (Pletcher & Younggren, 2013). Materials that are natural to the environment *do not include* toys brought into the home by EI providers.

Professionals have many valid reasons for bringing toys into homes. For example, novel toys can help gain a child’s attention and encourage active exploration, certain toys target specific skills, and some toys can create an active role for professionals as they work on particular child outcomes (Crawford & Weber, 2014). In addition, many interventionists who bring toys with them on home visits feel that this helps them more effectively plan a home visit according to the child’s outcomes (Nwokah, Hsu, & Gulker, 2013). However, family perspectives on bringing toys into the home should be considered. Family members may wonder how they can get their child’s attention when they cannot afford to buy new toys on a regular basis. Caregivers also may be concerned that they do not know how to implement strategies throughout the week without specific toys available to them. In addition, children often get upset when a provider takes toys away, leaving parents with crying children at the end of every EI session (Crawford & Weber, 2014).

When EI professionals bring in a toy bag and lead sessions as they target specific skills, parents may have trouble understanding their role within the sessions. Some caregivers find other things to do during home visits or leave the room, believing that the child benefits from interacting with the professional alone

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(McWilliam, 2010). However, research shows that child learning does not occur during weekly 1-hr home visits administered by skilled professionals (Pletcher & Younggren, 2013), as most of a child's waking hours are spent with family members and other caregivers. This means that these caregivers have a greater impact on child development and learning (Crawford & Weber, 2014). Thus, EI professionals should help build families' levels of confidence and competence related to child learning (DEC, 2014b), not target specific skill development using a toy bag.

When professionals show up for home visits with a toy bag, it can convey to parents that the hands-on work by a professional is more important than the family's impact on the child (McWilliam, 2010).

Even in cases where parents are included in EI sessions, a bag of toys may leave family members feeling that the materials in their home are insufficient. Many families end up purchasing toys used in sessions, believing that “the toy” is the key to success instead of the skills being targeted (Crawford & Weber, 2014). Because professionals who bring a toy bag tend to take the bag away at the end of the session, opportunities do not exist for families to use these materials to work on targeted skills

between visits (Crawford & Weber, 2014).

Other disadvantages of bringing toys into the home for EI visits include the transfer of germs and the physical strain it can take for providers to carry a bag of toys (Nwokah et al., 2013). In addition, using a toy bag does not enable the interventionist to see how a parent and child typically play together or interact in their home environment (Nwokah et al., 2013). Children spend more time engaged in family routines and activities than on the floor playing with toys (McWilliam, 2010), therefore, when EI professionals promote natural learning opportunities they support families in using daily routines and activities to facilitate child development and learning (Rush & Shelden, 2011).

Bagless intervention looks different from traditional EI therapy as the focus of sessions shifts from a bag of toys to authentic activities based on the interests, strengths, and priorities of children and their families (Johnson, Rahn, & Bricker, 2015). Instead of deciding what toys to use to address skills, the professional and the family collaborate to embed intervention into things that the family is already doing (Rush & Shelden, 2011). When bags are removed from sessions, providers must rely on family routines, activities and materials as a context for intervention. Bagless interventionists follow the child's interests as they use and adapt materials to target the child's goals; they also help families learn how to use and adapt materials found in the home. Materials in the home might include clothing, utensils, dishware, books, toys, and other household items that fit into the daily routines. These naturally occurring interactions and routines (i.e.,



mealtime, bath time, nap time, dressing, outdoor play, and grocery store visits) are familiar to infants and toddlers, which allows professionals to enter them without disrupting the family's daily life (Fein, Helt, Brennan, & Barton, 2016).

Specific routines can be targeted during home visits because they are particularly difficult or enjoyable for a child (Ridgley & O'Kelley, 2008). Difficult routines are addressed during home visits by identifying strategies to make the routines run more smoothly for the family. Enjoyable routines are good contexts to practice new skills. Using typical family routines and activities also helps support generalization, whereby children use targeted skills across time and settings with a variety of materials and people (Johnson et al., 2015).

*When asking about a family's concerns, Lauren learned that dressing was a particularly challenging part of the day for Lillian. She and Lillian's mother, Lori, discussed what was currently happening, what the family would like to see happen, and strategies for how to get there. On the next visit, Lauren observed Lori dress Lillian, and afterward they debriefed how the routine went. Another family Lauren worked with explained that food was extremely motivating for their child, Preston. Lauren and the parents brainstormed skills that could be addressed during mealtime as it was such a motivating routine. They decided to practice making requests and combining words into two-word phrases such as "more apples" or "apples, please" during meals across the day.*

As shown in the examples above, bagless intervention should emphasize a triadic approach, in which the triad refers to the

professional, parent, and child (McCollum & Yates, 1994). The professional serves as a facilitator of parent-child interactions to support caregiver competence and confidence, as well as child learning. The six triadic strategies are establishing the dyadic context (between the caregiver and child), acknowledging parental competence, focusing attention, providing information, modeling, and suggesting (see McCollum & Yates, 1994 for details). Triadic sessions encourage caregivers to lead sessions, focus on their child, and engage with providers (Salisbury & Cushing, 2013).

## How Do I Plan for Bagless Home Visits?

Some professionals believe that using toy bags enables them to select specific toys to address child outcomes. They may feel that then they can effectively plan home visits, and they question what they would do without a toy bag (Nwokah et al., 2013). However, planning for sessions is not limited to planning the toys that will be used to target outcomes. Planning EI sessions might look different when the toy bag is removed, but planning is still a necessary component. For example, bagless interventionists must plan how to gather information about a family's concerns, daily routines, activities, and priorities (Johnson et al., 2015). This information can be collected during informal conversations and intentional questioning or using tools such as the routines-based interview (RBI; McWilliam, 2010). The RBI is a structured interview that helps families choose goals based on their current level of functioning (i.e., routines, strengths, and priorities). By

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using the RBI, professionals can build positive family–professional relationships that are focused on addressing family concerns.

Planning for bagless home visits requires professionals to know how to promote caregiver participation and capitalize on the natural environment. Pletcher and Younggren (2013) identified numerous practices for EI professionals to use during home visits including asking open-ended questions at the beginning of sessions about events/activities, asking about additional concerns and problems, and discussing which outcomes to focus on during the session. Professionals also should participate in routines and activities with the family during sessions to promote desired skills and behaviors. Interventionists’ participation in such routines might include providing information to families, observing, modeling, teaching, coaching, and/or consulting (Pletcher & Younggren, 2013).

In summary, preparation for home visits using a bagless approach requires professionals to think about what questions they might ask families, how they can help families embed goals into routines, and what kind of information they can share with families to promote learning. In addition, professionals must plan EI sessions at times that enable them to

participate in specific routines, such as during dinner or at bath time.

## How Do I Make Sure That Families Understand and Support Bagless Intervention?

Some parents may have a difficult time understanding a bagless approach, especially if their other EI providers use toy bags. They might be confused when the bag of toys is eliminated and wonder how skills will be targeted without it. Change can cause many different reactions, such as anger, stress, worry, confusion, and defensiveness (Pletcher & Younggren, 2013). When an EI provider decides to switch to bagless intervention, she should prepare her current families for that change and give them time to ask questions and share their concerns before the change is made. EI providers also can ease into bagless intervention by gradually decreasing the size of the bag or the number of toys brought on home visits (Woods, 2009).

Switching to bagless intervention may be particularly difficult for families who receive services from other professionals who use toy bags. Caregivers might believe that the bagless interventionist is doing something wrong because he or she is not addressing skill development in the same manner as their child’s other EI providers (Crawford & Weber, 2014). When families have concerns about the different service delivery methods used by their child’s interventionists, it may be helpful to invite the service coordinator to



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discuss the issue with the family or have a team meeting (Crawford & Weber, 2014). Bagless interventionists may want to share their perspectives about why they do not bring toys with them and encourage other team members to adopt the practice.

Providers should explain to families that the best way to promote child learning and development is to incorporate intervention into routines, activities, and materials that are familiar to the family rather than bringing in toys. Bagless interventionists can discuss the flexibility they have to meet in various community settings such as at the park, grocery store, and play groups (Corr, Spence, Miller, Marshall, & Santos, 2016). When EI providers explain bagless intervention to caregivers, they should keep in mind that adults have various learning styles (Crawford & Weber, 2014). Information can be presented to families in a variety of ways including videos, handouts, and verbal descriptions (Pletcher & Younggren, 2013). Information that EI professionals share with families might include differences between bagless and traditional intervention, benefits of bagless intervention, and the roles of the caregiver and professional when using a bagless approach. Salisbury and Cushing (2013) compared provider-led intervention and triadic intervention. They found that caregivers became more involved during triadic sessions in response to the provider's actions (Salisbury & Cushing, 2013), which suggests that parents can adjust to changing roles in EI.

As the major difference between traditional therapy and bagless intervention is that toys are not brought into the home, families may

assume their own toys will be used instead. Families may feel anxious that they do not have enough toys or the “correct toys” to address their child's goals. Providers should inform families that they can use and adapt a variety of materials in the home, not just toys. Examples of household items that can be used during home visits include shoe boxes, plastic bottles, laundry baskets, and egg cartons (Crawford & Weber, 2014). Professionals should stress to families that EI is more than playing with toys, for home visits are also opportunities for families to receive support to address financial needs, basic necessities, needed equipment, and community resources (DEC, 2014b; McWilliam, 2010).

*When Lauren switched to bagless intervention, many of her families had questions and concerns about the new service delivery method. One family was particularly concerned because they viewed Lauren as the “expert” in teaching their child new skills. They wanted to know how their child would learn new skills if Lauren was no longer bringing specific materials to address skill development. Lauren revisited the family's goals for their child and helped them identify household materials and routines that could be used to address them. She helped the parents use routines such as folding laundry and getting dressed to address the goal of “following directions to participate in family routines.” The parents were willing to try using their own materials and routines to support their child's learning over the next few months. Lauren followed up with the family, offered suggestions, and connected them with additional resources as needed.*

## How Do I Ensure That I Am Addressing Children's IFSP Outcomes When I Go Bagless?

EI providers are encouraged to embed learning opportunities into everyday routines for children and families (Crawford & Weber, 2014). Natural routines are used in intervention because they are comfortable to children, offer multiple opportunities to practice skills, encourage positive caregiver-child interactions, and promote generalization (Fein et al., 2016). To ensure that learning occurs during family routines, IFSP outcomes should be functional for the family. Functional goals promote skills needed for the child to function in settings such as the home, child care, and community (McWilliam, 2010); they include goals such as drinking from a cup, washing one's hands, or putting on shoes. These activities are important to families because they support a child's independence (Johnson et al., 2015). Skills such as pointing to objects in a book, stacking blocks, and sorting objects by color may not be as important to family functioning as naming household objects, putting dirty

dishes in the sink, and cleaning up after an activity (McWilliam, 2010).

Child-directed actions, play, and activities are important in bagless intervention because they emphasize children's interests, keeping them more engaged (Johnson et al., 2015). Activities that follow the child's interests are usually naturally occurring and can be capitalized on by professionals and caregivers to support child development (DEC, 2014b). Interventionists should teach families how to utilize, adapt, and expand child interests to address developmental outcomes. Child learning is founded in interactions with family members (DEC, 2014b), which means providers should give families the skills, tools, and resources to support their children using family routines and materials.

Professionals can teach family members to use materials and activities that are readily available to them, as one toy or activity within a family's home can be used to address several goals (Nwokah et al., 2013). For example, blocks or cardboard boxes can be used to elicit communication, motor, and clean-up skills. Also, materials can be created during home visits (Nwokah et al., 2013), such as toilet paper roll megaphones (to help with language outcomes) and cereal box puzzles (to promote problem solving). Creating materials out of household objects helps teach families to adapt materials in their home to promote children's development.

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## When I Go Bagless, Can I Bring Supplementary Materials With Me to Address Specific Skills?

There is not a complete agreement in EI regarding whether

bagless interventionists should bring supplementary materials into the home. Some providers believe that if there are not appropriate materials in the home to work on specific skills with a child, then they should give or lend toys to families to work on developmental skills (Johnson et al., 2015). These toys might come from the professional's personal collection or from early childhood programs. Also, some home-visiting programs have a lending library from which parents can borrow toys that address skills worked on in sessions (Nwokah et al., 2013). Lending or giving toys to families allows them to continue working on intervention strategies that were addressed during the home visit. However, lending toys can cause stress for families if they worry about forgetting to return them or losing or breaking the toys (Crawford & Weber, 2014).

Some EI scholars stress the importance of increasing a family's capacity to access resources on their own. Instead of interventionists providing toys for families to use or keep, professionals can help families find inexpensive, slightly used toys (Rush & Shelden, 2011). EI providers also can teach families how to buy developmentally appropriate toys that can be used to address multiple child outcomes (Nwokah et al., 2013).

As EI recommended practice encourages interventionists to use materials that are available in families' homes and communities (Pletcher & Younggren, 2013), whenever possible professionals should avoid bringing specific toys to address skill development. Instead, they should adapt household materials that are available and embed outcomes into naturally occurring routines (DEC, 2014b). In addition, interventionists should stress that the materials being used are not

the agent of change, but that rather caregiver-child interaction is what promotes the acquisition of new skills.

*Lauren worked with a family that stated that they wanted their son, Jack, to do more puzzles, but they did not have any of their own that were age appropriate. Lauren brainstormed with the family about how they could acquire puzzles for the child. The dad, Jeremy, suggested they look at yard sales. Teresa, Jack's mother, suggested they could make their own, but she did not know how. Lauren affirmed the parents' ideas and made a plan to revisit it next week with them. Lauren brought examples of home-made puzzles during their next home visit. She worked with Teresa to acquire materials that were needed to make puzzles, such as cardboard boxes, Velcro, and cereal boxes. She also followed up with Jeremy about finding puzzles at yard sales, and he showed her two used puzzles he found that week. Lauren helped them practice using the different puzzles with Jack by modeling, observing, and giving feedback.*

## How Do I Engage in Bagless Intervention If My Agency Uses Toys?

Every EI professional is required to follow the laws and regulations of Part C, which state that natural environments should be the context for intervention. In addition, early interventionists should participate in regular professional development opportunities about recommended practices in EI (Pletcher & Younggren, 2013). Administrators and supervisors should promote adherence to DEC's position statements and recommended

**Table 1**  
Resources Related to Bagless Intervention

Resource reference	Description
Childress, D. (2016). But everyone else still brings toys [Web log post]. Retrieved from <a href="https://veipd.org/earlyintervention/2016/03/10/but-everyone-else-still-brings-toys/">https://veipd.org/earlyintervention/2016/03/10/but-everyone-else-still-brings-toys/</a>	Addresses how providers can make the switch to a bagless approach
Crawford, M. J., & Weber, B. (2014). <i>Early intervention every day! Embedding activities in daily routines for young children and their families</i> . Baltimore, MD: Brookes.	Ideas for embedding skills into routines, with a table of household items that can be used for skill development
Fein, D., Helt, M., Brennan, L., & Barton, M. (2016). <i>The activity kit for babies and toddlers at risk: How to use everyday routines to build social and communication skills</i> . New York, NY: Guilford Press.	Ideas for promoting natural learning within activities across all developmental domains
McWilliam, R. A. (2007, October 11). Early intervention in natural environments [Web log post]. Retrieved from <a href="http://naturalenvironments.blogspot.com/2007/10/toy-bags.html">http://naturalenvironments.blogspot.com/2007/10/toy-bags.html</a>	Discusses the toy bag as “a problem” in intervention
Woods, J. (2009). <i>Family-guided approaches to collaborative early-intervention training and services: 12 step program to decrease toy bag dependence</i> . Retrieved from <a href="http://dmm.cci.fsu.edu/IADMM/materials/12steps.pdf">http://dmm.cci.fsu.edu/IADMM/materials/12steps.pdf</a>	Offers 12 suggestions for EI professionals to slowly quit using toy bags
Woods, J., & Lindeman, D. P. (2014). <i>Family-guided approaches to collaborative early-intervention training and services: Training modules</i> . Retrieved from <a href="https://facets.ku.edu/training-modules">https://facets.ku.edu/training-modules</a>	Includes five training modules on components of early intervention such as using daily routines as a context for intervention

practices (DEC 2014b). Even though recommended practices, position statements, and the EI principles state that toy bags should not be used in EI, many providers and programs still bring toys into families’ homes. These programs and professionals may use toys because they are not aware of what EI principles say about toy bags or because they are reluctant to change their practice.

Individual providers who work in programs that still use toy bags can help promote change. EI providers must recognize that they are part of a team and explore how they can make their team better. Bagless interventionists should consider what they can do to change practice within their program. They can offer to provide training, share resources, talk

to coworkers, and provide evidence that supports the use of bagless intervention. Also, coaching can be used to promote bagless intervention within a program. In peer coaching around bagless intervention, two professionals with similar roles would engage in conversation, planning, observation, and reflection to enhance their skills in using this approach to EI (Rush & Shelden, 2011).

## Where Do Professionals Who Are New to Bagless Intervention Find Resources?

When interventionists begin to implement a bagless approach, there

are several resources that they can refer to for guidance. For a list of resources that can be used by bagless interventionists, see Table 1. Early interventionists also can reach out to other professionals to gain more information and support around bagless intervention.

## Conclusion

*After 4 months of implementing a bagless approach during home visits, Lauren noticed many benefits. She realized that she was more attuned to families' concerns and priorities for their children. She was beginning to*

*learn to embed intervention into the naturally occurring routines of each family, which positively affected the families with whom she worked. Without her toy bag, Lauren also noticed increased caregiver participation. The families she worked with were more engaged during sessions and they reported that they practiced skills more frequently between visits. Lauren has become an advocate for bagless intervention because she understands that a toy bag does not align with EI principles, and that generalization is supported by embedding outcomes into routines and typical home activities.*

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