This final report describes the activities of Project Dakota Outreach, an early education program for children with disabilities designed to assist families living in Department of Housing and Urban Development (HUD) Empowerment and Enterprise Zones in Texas, New York, and Minnesota. The major feature of the model is power-balancing, a concept comprised of family-staff interaction protocols that lead to staff responsiveness to families throughout early intervention teamwork and services. The project staff aided local programs in determining practice and procedure needs and in training staff to use new and adapted practices. The project formed relationships of significant duration in certain settings, where requested, in order to help interested programs follow through in meeting complex regulatory structures. All training and consultation services were tailored to the particular setting's constellation of cultural and community resources. The project also served state leaders and regional leaders through participation in their initiatives and in product review and development. The project's specialization in urban early intervention led to the creation of new formats for training and program improvement. The report describes the goals and objectives for the project, the framework, the model and participants, problems or changes that were faced, and the outcomes of the projects. Appendices include a curricula for urban early intervention and a description of Erie County's (New York) "Partners in Program Development" early intervention program. (CR)
PROJECT DAKOTA OUTREACH

FINAL REPORT

Submitted to
The Early Education Program for Children with Disabilities
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October 18, 1998

ATTACHMENT:

CULTURAL THRESHOLDS, WISE ELDERS, and CROSSFIRE:
A New Curricula for Urban Early Interventionists
SECTION II. ABSTRACT

Project Dakota Outreach
An Early Education Program for Children with Disabilities Project

Linda Kjerland, Project Director
Jean Mendenhall, Project Coordinator
Ana M. Perez, LuAnn Olen, Rhonda Wilkins, Associate Trainers

Project Dakota Outreach was funded by the U.S. Department of Education from 1995-1998. Our purpose was to extend the project’s proven benefits to greater numbers of families living in HUD Empowerment and Enterprise Zones in Texas, New York, and Minnesota. These benefits are family-centered, community- based policy and practice for early intervention programs in targeted areas.

The major feature of this model is power-balancing, family-staff interaction protocols which lead to staff responsiveness to families throughout early intervention teamwork and services. The project staff aided local programs in determining practice and procedure needs and in training staff to use new and adapted practices. The project formed relationships of significant duration in certain settings, where requested, in order to help interested programs follow-through in order to meet complex regulatory structures. All training and consultation services were tailored to the setting, to their constellation of cultural and other community resources.

Project Dakota Outreach also served state leaders and regional leaders through participation in their initiatives and in product review and development. The project’s specialization in urban early intervention led to the creation of new formats for training and program improvement where more traditional training formats were not viable. A summary of this assistance follows:
In New York State the project replicated project practices throughout Erie County which serves 1300 hundred families in urban and rural settings. Recipients of outreach services were county administrators, service coordination departments, local program directors and service providers, the local interagency council, and parent leaders. The outcome was transformation of all IFSP team practices across the county. Results indicate that the services aided family priorities, access to natural settings, cost containment, and structures for effective teamwork.

In Texas, the project directly assisted state department leaders in their staff development plans by training programs in Houston, Dallas, Midland, Richmond-Rosenberg, Lubbock, Garland, San Antonio, and in preparing sample IFSP’s in the new state format to demonstrate practical strategies for integrating natural and informal community sources of support when addressing family priorities.

Minnesota’s HUD enterprise communities, Minneapolis and St. Paul, were the focus of extremely well received Urban IE staff retreats tailored to their neighborhood-based and culturally-based resources. The project also served the state’s family support technical assistance network by articulating strategies and training at state-level conferences.

National dissemination occurred throughout the three-year period. Project staff provided explicit guidance for callers from universities and programs across the country and sent materials to individual requestors and resource centers across the country. As the program came to a close, the project organized a compendium of its print resources and sent them to related outreach projects, requesting state programs, and NEC*TAS.

The project has ended and all documents have been distributed and/or maintained as required by EEPCD and EDGAR. Further contacts can be made with the project director at kjerland@pclipnk.com or by calling 1-651-917-4898.
SECTION III. TABLE OF CONTENTS

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A. Cultural Thresholds, Wise Elders, and Crossfire—A New Curricula for Urban Early Intervention

B. Erie County—Project Dakota Training Partnership
SECTION IV. GOALS AND OBJECTIVES

Goal 1: New York State

1.1 New York City/Bronx: Assist early intervention leaders and select programs in incorporating tailored and responsive IFSP evaluation and assessment practices. The Project instead provided three years of intensive support to Buffalo, New York (Erie County).

1.2 New York State Regional Training Teams: Enhance the competence and confidence of regional trainers in critical IFSP issues and evaluate their impact on local teams. (This training was offered but the state had used a grant process to TA and used an in-state resource. However, the Erie County work was communicated to state leaders via the county leadership and numerous products prepared by Erie County for state wide use.)

Goal 2: Texas

2.1 Houston: Assist inner city Houston's Infant Program in defining natural settings and supports and incorporating them into early intervention service delivery.

2.2 Rio Grande Valley: Help to design a transdisciplinary and transagency team model for rural areas where there are few trained staff and high needs for linking families and informal supports. (This goal was amended in consultation with state leaders to a shift to predominantly urban settings including Dallas.)

2.3 Texas IFSP Samples: Capture proven strategies for natural settings for statewide use.
Goal 3: Minnesota

3.1 Minneapolis/St. Paul: Enhance the competence of direct service staff to link with community and cultural resources for service flexibility, inclusion, and culturally sensitive IFSPs.

3.2 Minnesota State Leaders: Assist in planning a family leaders conference, designing new family support system, and advising the plan for comprehensive system for personnel development.

Goal 4: National Dissemination

4.1 Prepare tailored information packets for 350 requesting parents and staff per year.

4.2 Prepare tailored packets for all outreach training (1600 products per year).

4.3 Display and/or present at EECPD, NCCIP, DEC meetings; send to ERIC, NEC*TAS, state leaders.

SECTION V. FRAMEWORK

The purpose of Project Dakota Outreach was to replicate the Project's model components. Specifically, this project promoted family-centered, community-based early intervention policy and practice within local communities and state departments. Our purpose was to insure that more young children with disabilities will be able to enjoy their culture of childhood and that their families will have tailored support to grow and develop in ways meaningful to them.
In the mid and late 1990's, states’ Part H systems face of rising enrollments, changes in legislative commitment, health care reorganization, welfare reform, and quickly changing demographics, all of which influence service methodology and practitioner skills. These changes have either strengthened, weakened, or altered Part H program integrity and program relevance. Project Dakota’s long experience in the effects of policy and program practice on family and staff outcomes has been a great benefit to outreach sites.

SECTION VI. MODEL AND PARTICIPANTS
The purpose of Project Dakota Outreach was to replicate the Project's model components. Specifically, this project promoted family-centered, community-based early intervention policy and practice within local communities and state departments. Our purpose was to insure that more young children with disabilities will be able to enjoy their culture of childhood and that their families will have tailored support to grow and develop in ways meaningful to them.

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SECTION VII. PROBLEMS AND HOW RESOLVED

Urban, poverty neighborhoods, with their escalating crime and declining quality of housing are risky places for families to live and raise children. Nearly all major cities are hard at work, through HUD plans or their own funded initiatives, to build and rebuild neighborhoods, to invest in social capital, and see cultures within as assets to safeguard.

So too must urban early intervention programs struggle to define their role and methodology. In interviews with more than 15 urban EI leaders over the past three years, issues of safety and staff roles in relation to community supports were top issues. This project committed to these issues:

A. **Address safety issues of families and staff.**
   In a survey of Minnesota's urban EI staff, most used at least six strategies on a daily basis to reduce risk yet they shared two clear worries: unanticipated violence during a home visit to a family they barely knew and random street shootings. They also expressed concern about the effects on children and parenting and had this concern confirmed in recent brain research on the mediating effects of parenting on cortisol levels of children in stressed environments. Given that chronic exposure to violence can impair development (Craig, 1992), urban EI programs needed to find highly supportive venues for meeting and gathering families in locations accessible to families.

B. **Face the realities of economic poverty to find accessible, useful resources.**
   There are significant effects of poverty on child development and outcomes: When family structure, parent education, race and ethnicity are taken into account, poor children fare substantially worse than non-poor children (Havemen, Wolfe, Ginther, 1968). Low-income families may be less likely to get the kind of help they need. In a recent early intervention study across five southeastern states, Filer and Mahoney, 1996 found, "families reporting the greatest levels of service were those who had sufficient time to participate and the resources and personal skills needed to effectively negotiate services...Programs must be alert that some families with great levels of need may have limited capabilities of expressing and negotiating those needs..."
In the *Infants and Young Children*, October 1996 article of this same study, the authors note, "...outcomes listed on IFSP's tend to focus almost exclusively on child-level concerns...However, family-level concerns, which are not listed on the IFSP often emerge during the course of intervention...frequently precipitated by crises... Thus, while child-level concerns may be dealt with proactively... family-level concerns may be dealt with reactively, with limited systematic planning."

The harsh landscape of American urban poverty is now the setting for a great many of our long-standing urban early intervention programs which had their origins in an era of far more affluent decades. These programs have concluded that they need new methods or face being seen as irrelevant against the demands of hunger, safety, and shelter.

C. **View culture as a resource and actively bridge cultural differences.**

Typically, urban EI staff rosters are disproportionately European American compared to the ethnicity of the families they serve. EI staff are more likely to live outside the highest poverty neighborhoods and thus lack personal connections with the neighborhoods they serve. Lastly, if staff have been living in rural or suburban areas, or with greater family income, they may also bring styles and problem-solving strategies that have little fit with the pressures of inner city low income family life and coping methods.

This gap was confirmed in a small study of EI staff (DeGangis, Wietlisbach, Poisson, and Stein, 1994). They concluded, "Culture and SES (socioeconomic status) are important variables that have an impact on the IFSP process."

Garwick, Kohnman, Wolman, and Blum (1996) conclude: "Cultural beliefs play a major role in determining family and community attitudes...Different ethnocultural perspectives influence treatment choices and family roles...(and) conflict and misunderstanding can occur between family caregivers and providers when their beliefs collide."

D. **Create alternatives to traditional home and center-based EI services.**

The National Latino Behavioral Health Workgroup's *Cultural Competence Guidelines* recommend that...services should be in a "Culturally friendly location and ambiance and...within the person's values and reality conditions...including familiar and valued community resources from the minority culture".
In the Carter Center’s, *The Case for Children*, Frank Farrow advises, "The distance between professional and community must be lessened...in neighborhoods where the community fabric is torn or threadbare...Conditions will not improve for many families unless the help they need is close to home and in a form attuned to the conditions in which they live."

The commitment to local versus centrally-located services was also reflected in a study by Axtel, Garwick, Patterson, Bennet and Bloom (1995), "...community-based services help normalize life experiences that foster development of psychological and social competence".

Pressure on early intervention programs to achieve this shift in service contexts has grown. Studies with families whose programs include home based services are preferred over those that are only center-based. Home visiting has also been viewed as a critical vehicle to improve resource access for families. A study of early intervention home visitors, (Roberts, Akers, Behl, 1996, found that home visiting was a key means in identifying and responding to needs which could be met across a range of agencies.

There has also pressure from state leaders to make faster progress toward natural settings. In some cases, states have dramatically altered fiscal reimbursements (New York, for example); others have cut out all reimbursements for services in segregated centers (as in Texas and New Hampshire). Whether by philosophical conviction or fear of losing funding, urban EI programs were given this project’s assistance in rethinking every aspect of the where, how, and with whom they did their work.

In a 1993 study of 1200 St Paul families (44% families of color and 35% with incomes under $10,000) by the St. Paul Children's Initiative, families suggested clear solutions for how to improve service delivery:
- physically locate services in the neighborhoods
- promote wellness and prevent problems (e.g. parent education/support)
- improve communication and information systems
- reduce or eliminate barriers to receiving services (child care, transportation)
- coordinate and integrate services
- employ family workers who have much in common with community families.
SECTION VIII. FINDINGS

Urban high poverty neighborhoods are risky places for families to raise children. They are also challenging places for early intervention staff to work. The answer was found in bringing families, staff, and wise elders of the neighborhoods together to forge new partnerships and insights.

In response, this project actively sought and devised early intervention program strategies for working with families in homes and in nearby alternative settings that were close, culturally validating, safe, and comfortable for families within what are otherwise quite intimidating environments. The project built on solutions backed by research and its own proven team practices for family-staff collaboration with urban families. Project staff helped programs begin neighborhood-based models which attended to safety, poverty, and cultural responsiveness in their communities. Project Dakota’s approach to outreach for many urban programs abided by these commitments:

A. Bring families and staff together with respected members of the family’s neighborhoods.

Urban early interventionists in Minneapolis and St. Paul prepared six Saturday retreats. EI staff and families gathered with neighborhood leaders to explore new ways of understanding one another and working together.

Confirmation of this approach came in a January, 1997, study by Project Dakota. Fifty Minnesota urban EI staff were invited to work with 15 members of key urban resources in problem-solving a family scenario typical of their settings.

An analysis of their suggested strategies showed the dramatic need these partnerships:

- 26% were typical EI activities: parent education, listening, encouragement, parent and child activities

- 74% required connections with less traditional resources and informal supports such as facilitating peer friendships, career planning, new relationships with local police.
B. Build training plans on felt needs of program staff and participants.
In the fall of 1995, Project Dakota staff interviewed 30 urban EI staff via small group focus groups. They were asked to identify areas of their perceived weakness in working successfully with low income urban families. The results fell into four learning goals:

1. Understand major economic and social issues impacting inner city families.

2. Learn important, successful innovations in helping inner city families including finding stable housing to reduce the negative consequences of mobility.

3. Build understanding of the cultures and cultural dimension of EI services.

4. Understand the effects violence and recovery from post-traumatic stress.

When these same Minnesota EI staff were trained on these topics above via two day long retreats, changes in their understanding and behavior were evaluated via structured telephone interview survey, one to three months following the training. The changes were:

24% related to insight and awareness: "I had not realized the impact of homelessness on stress levels for parenting until I came home that night and went to bed, in MY bed."

23% addressed altered practices (some as an individual, most for their team): "We went to a nearby church day care center and planned a family/neighborhood event with their program."

21% were strategy development to attempt system change in their program: "We met with our Coordinator to get the bus routes changed so our EI families could be part of the parenting group for all families."

14% led to seeking out new relationships with culturally-based or neighborhood-based agency: "I was shocked to be in a totally Spanish speaking setting; I found out a lot about the Central American families coming here after meeting with the people at CLUES."
4% involved sharing print materials with other team members: "I shared the materials on help for housing crises with others on my assessment team."

Helping staff reach out and approach others in new ways was critical in making the shift. As defined by Carl Dunst, (unpublished manuscript, 1997) "resource-based approaches view communities as having rich and varied opportunities for promoting child development, service-based approaches tend to rely primarily on professionally-prescribed and implemented learning activities for influencing child development....the influences of practices aligned with the new paradigm are undeniably more positive than those associated with a traditional approach to early intervention. Such evidence indicates that the call for adoption of a "new way of doing business" needs to be taken seriously."

C. Tailor outreach methods to the circumstances of each community.
Project staff worked with community program leaders to decipher which types of outreach and what extent of outreach assistance programs would accept. The menu consisted of:
- telephone consultations to analyze situations and opportunities
- on-site consultations with program representatives
- one to three day on-site training plans
- evening strategy or debriefing sessions
- Saturday retreats
- continuing education of graduate course credit for participation
- product or tool development or review

SECTION IX. PROJECT IMPACT
2. Erie County/Buffalo, New York - 1300 children 0-3 - see next section
4. Texas - see next section in this text
Summary of grant funded work in Texas: 1995-1998
Texas work was directed by the state ECI training coordinator with input from regional training and monitoring consultants and local program development plans. Project staff presented at two regional conferences and worked on-site with 12 ECI programs. Of these, four were HUD urban empowerment zones or enterprise communities in Dallas or Houston. Training and trainers used were matched for each site depending on audience composition and desired content of the programs.

The two regional conferences:
Feb 6, 1997 Houston - Region IV ECI programs Diane Ricklefsen
Natural Settings: Assumptions, Methods, and Values for Successful Teams

April 22, 1997 Houston - Region IV ECSE Sonya Hollan
From ECI to Preschool: A Natural Transition or Turbulent Waters?

Content areas for the 12 local ECI programs were:
- responsiveness to families 9 programs
- natural settings (formal and informal) 9 programs
- collaboration and consultation skills 6 programs
- initial visits with families 4 programs
- assessment (family driven, play based, transdisc) 4 programs
- team building and transdisciplinary structures 4 programs

Other topics addressed by individual programs included child find, IFSP development, diversity, home visits, parent feedback for program development, parent support, transition, change/merging two ECI programs, and working in high-risk inner city neighborhoods. In six programs, follow-up action plans for the new practices were written with Project staff assistance.

Training methods were based on analysis of program and audience needs. They included: presentation of concepts, stories; role plays and interactive exercises to discern current practices and teach new skills; reflective exercises to illumine values and biases; dialogue on new practices; demonstration of the process of planning and carrying out the assessment and then developing the IFSP.
Texas Programs Served by Project Dakota, 1995-1998

1. Aug 12, 1996 Houston - Infant Development Prog. Kathy Moody
   ECI staff working w/ inner city families presentation, role play, discussions

   ECI staff team building, transdisc. model presentations, small group work, discussions

   ECI staff Regions 15, 18 from team bldg, respon. to fam, nat. envir, diversity, child-find presentation, role play, discussion, solution circles

   ECI staff responsiveness to families, inclusion, assessment, presentation, role play, discussion, action planning

5. Feb 18, 1997 Houston - Keep Pace, Geargann Retmeier & Project TYKE, Diane Ricklesen
   ECI staff natural settings, grant writing, consulting presentations, small group work,

6. Feb 19, 1997 Houston - Infant Programs, Marlene Hollier & MHMR of Harris County
   ECI staff alternative settings w/families presentation, team evaluation

8. Feb 20, 1997 Richmond-Rosenberg - Kid Project Debra K, & Project GROW, Sandra Collins ECI staff natural settings, transition, merger presentations, discussions, consultation, strategic planning

    ECI staff consultation logistics and skills, home visits, program evolution, presentations, discussions,

10. April 21, 1997 Houston - UCP Kathy Moody
    neighborhood-based interactive exercises, action planning

11. April 22, 1997 Houston - Region IV ECSE Sonya Hollan presentations, small groups, action planning interagency structures

    ECI staff & parents TD teamwork to build presentation, role play, interactive exercises, analysis of practices responsiveness to families

13. Jun 15-17, '98 Dallas - Parent Infant Training Center Barbara Moss
    ECI staff & parents responsiveness to families, inclusion, collaboration demo assessment & IFSP, presentation, analysis of structures and practices, interactive exercises, action planning

16
CULTURAL THRESHOLDS, WISE ELDERS, AND CROSSFIRE: A NEW CURRICULA FOR URBAN EARLY INTERVENTION

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Abstract
Urban early intervention is challenged on many fronts: by the need to define the meaning of inclusive settings in what can be highly hostile environments, by the demands on families of welfare to work, and all within a context of tremendous linguistic diversity. Urban staff are less likely to find practical support and ideas if their training is organized around traditional topics or places them with suburban and rural staff. They are in need of real answers and real connections with the very neighborhoods they serve. As a group, they are likely to be living within those neighborhoods nor have personal ties within the neighborhoods of the families they serve. Project Dakota, with funding from the US Department of Education, designed a series of six Saturday retreats, 1996-1998, tailored to their learning needs and the assets of non-traditional neighborhood resources within Minneapolis and St. Paul, Minnesota. This process can be adapted to other urban settings.

From Family-Centered to Neighborhood-Centered Urban Early Intervention
The field of early intervention has labored long and hard to move from program-centered, to child-centered and to a family-centered approach. However, the harshness of urban core neighborhoods and the tremendous richness of cultures and languages within is beckoning EI programs to shift another gear into context, to be neighborhood-centered. For Project Dakota, neighborhood-centered has come to mean being in touch with the street issues, informal supports, and cultural bridges. Without these ties and skills, urban early intervention staff become highly vulnerable in streets or remain cloistered within institutions while families remain alone and isolated from critical information and supports.

Needed: Safe Harbors for Families and Their Urban Early Intervention Staff
For fifteen years, Project Dakota has served urban communities and made that settings its exclusive focus for the past five years. Highly-seasoned birth to three (Part C) staff had few relationships with non-EI family workers and wise elders within the neighborhoods they served. They were familiar with county social service and public health staff but not with culturally-based agencies nor other groups that provided critical supports for family survival. Their caseloads often spanned wide territories, which permitted them to stay with families as they moved. However, method of caseload assignment also limited their ability to link families to informal and stabilizing resources within neighborhoods.

Safety issues were remarkably the same, whether in St. Paul or Dallas or the South Bronx: staff worried about being caught in the cross-fire of unanticipated violence. Urban EI staff need just what families need: safe harbors throughout neighborhoods, places where they are known and welcomed, where they can stop in, use rest rooms, visit informally over lunch, trade ideas, and find partners in creatively supporting families right within their neighborhoods.
Urban EI Staff Retreats to Foster Neighborly Approaches

If relationships are key in neighborhood-based services, then traditional staff development sessions needed to be altered, both in focus and format. A very nurturing setting is needed if staff are to tackle biases, to go deeply into distressing topics, and to come away with a new sense of whose teams they might join. The retreats, two per year, described in this paper were designed by Project Dakota to increase the odds that personal and intrapersonal connections would flourish.

The Retreats Were Designed To Entice Participation

The retreats were held in mid winter and in early spring; EI staff chose these times as they fit what they felt were best months for their availability and openness to reflection. Several other features were built in to foster staff willingness to give up a Saturday for professional growth:
- staff could earn continuing education hours or graduate credit
- registration was priced low for each retreat, $10-$15 per person
- EI program administrators and LICC’s openly supported the retreats
- the retreats were held in a very comfortable, peaceful setting
- each retreat provided nourishing touches in the array of foods, decor, and music
  - the wording of the sessions, and preparation of keepsake name tags

The Community Determined the Priorities for Retreat Content

The retreat content was gleaned from program improvement needs voiced by all stakeholders:

EI administrators helped to plan major features of the retreats and were interviewed for trends, recent progress, their views, short-term and long term, on the course of program development.
  - the larger organization controls most of the staff development agenda
  - bus policies prohibit parents bringing siblings on the vans
  - the number in homeless shelters quadrupled in 18 months
  - EI programs are dispersed among many elementary schools and staff feel isolated from the mission of the rest of the school
  - the county is taking over the city screening role and we may be losing referrals

EI staff were interviewed in small groups about their unmet staff development needs related to very low income families of culture different than their own. Their concerns:
  - how to sort out our biases and generalizations
  - what are the non-traditional supports they draw upon that we don’t know about
  - what about areas out of our control that are top on family’s list
  - is there a place for white staff to fit in any more?
  - kids are sent back into scary homes, what about trauma recovery
  - the housing is terrible, what can be done
  - why does someone have another child when they are overwhelmed with the latest baby
  - cultural patterns influence when families will accept referrals; what can we do
Community leaders and successful street-level innovators from each cultures and within the neighborhoods were interviewed on what current EI staff practices fit their neighborhood and what practices could be learned by EI staff from those within the neighborhoods. Their recommendations centered around the need for services within neutral and culturally validating places and contexts within the community.

The Retreats Were Designed to Foster Lasting Effects on Participants

The format of each retreat day balanced whole group gatherings with small group choices, listening with talking, stories with research, and recreation with deep work on stressful topics. Each retreat featured performers from within the neighborhoods they served; this gave EI staff an intimate, pleasurable encounter with cultures of the families they served:
- an American Indian drum group and an honor song for the retreat
- African American church gospel choir
- Mexican adolescent and preschool dance troop
- professional Mariachi band to call them to the luncheon buffet
- Laotion traditional dancers and Hmong children’s traditional dancing

During each retreat, neighborhood leaders were invited to attend, to be present at displays of their print resources, and to be presenters. These individuals were chosen because they were accessible to the emerging interests of EI staff in forming partnerships within their neighborhoods. Throughout each retreat, the agenda facilitated informal gatherings and networking between and among individuals who would not otherwise mingle or sit together.

Rationale for Training on Neighborhood-based Early Interventions
- increased staff capacity to link families to supports within the neighborhood such as ESL classes, budgeting, child care, culturally-based and other peer support groups
- greater safety for staff to work within the neighborhood due to familiarity with wise elders and cultural
- increased EI family and child inclusion within their neighborhood which may reduce mobility
- family to family connections and empowerment within the neighborhood
- service methods reality-tested to neighborhood conditions and resources
- improved access to interpreters and translators from the particular culture of the families

Examples of Strategies for Neighborhood-based Urban Early Interventionists
- neighborhood asset mapping to learn formal and informal networks and resources
- neighborhood mini retreats to plan and solve problems with families and new EI partners
- listening to families in order to form closer ties with the family’s cultural supports and valued resources
- geographically assigned teams who specialized in certain neighborhoods
- access to a welcoming agency in the neighborhood where they can stop in to make phone calls, have their lunch, meet and gather with families near where they live
Project Dakota, Urban Retreats, page 4

Issues of Urban Early Intervention Families - Voices from Four Cultures

Families from four cultural groups were asked how they saw staff and what staff could do that would be more responsive or respectful; methods of eliciting this information are provided and were tailored to each culture and were primarily led by someone from the culture and neighborhood.

American Indian Families - via home visits and family pizza party in an apartment community room
- A lot of society uses stereotypes about Indian people; families have lots of experiences from other encounters with the system that are not positive.
- The families generally prefer services within and a part of other Indian community settings and value help to connect with other families in their situation who are of their culture.
- Warmth and friendliness are really key to building relationships.
- They are not just passing you through; they look at what other supports you might need.

African American Families - from a parent gathering at a culturally-based agency
- Families often feel judged, that staff are operating on assumptions rather than a sense of partnership.
- Take time to get to know one another, see the strengths. Treat me as though I have common sense.
- Home services are really straightforward and really involved.
- A good, helpful service coordinator is so important.
- A major concern of families is labeling and the tendency for their children to be viewed negatively instead of having developmental needs. The implications of this escalate as the child grows older.
- Come with a different outlook - ask us before you make judgments.

Hispanic/Latino Families - from home visits which led to forming a support network
- Language barriers; families have little or sometimes conflicting bits of information and struggle with those limitations in communication.
- It is really hard having a different interpreter each time. They are only there to interpret and don’t really know you or your situation. Then, after the meeting, they leave and you still have so many questions to be answered. There is no support, it feels cold.
- It is very hard to sign papers without really knowing what you are signing.
- We are afraid to ask questions because that would seem to be disrespectful to do with social workers, coordinators, nurses, teachers, whoever is working with us.

Hmong Families - from interviews with Hmong community leaders
- Families find that staff can help them feel less isolated and more supported.
- "I can see more sunshine", said one family after EI help started.
- Families do not know other families within their culture and beyond who have children with special needs and would like to meet them.
- Extended family members may be able to express that they are sorry about the child’s needs but are unfamiliar with what can be done.
- Practical issues come up but problem-solving can be hard due to communication gaps.
Tailor Made Retreat Curricula for Minneapolis and St. Paul Urban EI Staff

Each year there were two retreats and both retreats were organized around a theme; topics within that theme were dealt with in differing ways at each of the retreats.

1996 Theme: "TAILORING OUR WORK WITH FAMILIES IN THE INNER CITY"

The Place That I Call Home
- Good news and bad news in urban low-income housing
- Common housing crises/scenarios and quick next steps that EI staff can suggest
- Research related to stable housing and school achievement

Making Small Miracles Happen - Tips for Teams
- Hmong family voices on early intervention
- Hispanic/Latino family voices on early intervention
- Cambodian/Lao/Thai/Vietnamese family voices on early intervention
- When mothers or fathers are incarcerated...

Negotiating With Families in Crises: Cultural Issues and Respect
- Crises, Catastrophes, and Caring - the many faces of empathy for EI staff

Violence and Recovery - Betsy Groves, Boston Child Witness to Violence Project
- Effects of witnessing violence on adults and very young children
- Effects on staff of initial and repeated exposure to traumatic stories
- Recovery aids and patterns for children, parents, and staff
- Hurt, healing, hope: stories and models on trauma prevention and recovery

Bridging Cultures
- A safe place to bring questions and frustrations
- A mini-curriculum on the dilemmas of crossing parental boundaries
- Serving African-American families: hard questions and hard answers on "what it feels like"

Power Over or Power For Versus Power With
- Early childhood programs as part of the community its solutions
- News from urban programs in other cities
- A debriefing session on staff reactions to images of new roles for EI

Families and Substance Abuse: U of MN Research Institute findings
1997 Themes: "HEALING POWER OF SUPPORTIVE RELATIONSHIPS" and "SUPPORTING CHILDHOOD IN THE CITY"

Supporting childhood in the inner city: attachment, resilience, and vulnerability:
Where theory meets the real world: attachment patterns and strategies
Peacekeeping and therapeutic environments for young children
Incredible results from strengths-based approaches
Tapping community and natural supports

Stress reactivity, sensitive caregiving, the developing brain - Megan Gunnar, U MN
How cortizol works best and effects of chronic elevations
Differences in reactivity observed in brain-based systems
That externally observed behaviors do not always match internal stress reactions
Effects of varying duration of disrupted maternal care on developing children
Supports for stress management and reduction

Robbing Peter to pay Paul: experiential bean game on making ends meet day to day
Understanding middle income versus low income financial management tools and options
Understanding the difficult choices and time-consuming nature of low-resource management

Wisdom/Mother Wit: an informal cafe experience with wise elders
Wise elders across generations & cultures
Creatively tapping personal hopes and cultural wisdom

Attending to cultural knowledge and values
Views of effectiveness and acceptability for families of color
Discomforts, taboos, abuse, and resilience: boundaries and roles for EI
Subtleties in using interpreters and translators
MAPS and mind mapping for more open conversations and team planning

Crossing cultural thresholds
Past grief’s and losses and other lessons in
building and repairing staff and family relationships
American Indian ways in connecting, disconnecting, and reconnecting

City circles: pooling wisdom on the concept of safety and hope among
EI, police, child protection, families, and cultural-based supports
New roles for prevention, more global ways of view support, voicing worst fears
and best possible scenarios as a way to reach higher for new strategies in child protection
1998 Theme "STRESS, COPING, AND PATHWAYS TO RESILIENCE"

How attachments buffer stress and influences of temperament, Megan Gunnar, U Mn
Nurturing and empowering parents so they can buffer stresses

Unpacking tense times between African-American families and staff
Forming/sustaining disability-based and culturally-based parent support groups

Resilience research and health realization training - Cindi Claypatch, Mpls
Practical approaches and tools; roles for EC
Testimony from families on how they foster resilience
Resiliency self-care for staff

Wraparoun around and other team planning strategies
Blending developmental and life domains in team planning
Spanish IEP’s; keys for helping non-English speaking families

Fostering Relationships, Attending to Nurturing
Infant message, demonstrations on tender touch
Grieving and giving, lessons from Ken Moses
Grandparenting grandchildren: issues across cultures

Evaluating the Impact of the Retreat on Participants and Families
At the conclusion of each retreat, staff were asked to reflect on: what the learned, what was effective or what should be changed for the next retreat, what was puzzling or unsettling, and what specific ideas they would take back and use. Nearly all rated the retreats very highly. Staff who took the retreat for course credit wrote three to five page papers integrating concepts and ideas from the retreat and readings and articulated specific changes in their understanding and practice that had occurred for them.

Three to four months after each retreat, project staff or the project evaluator interviewed participants structured telephone interviews. They were asked to share the impact on their work because of the retreats. In year two, the results were recorded and categorized into four areas:

24% - reported changes in insight and awareness

4% - shared print materials with other staff

21% - pursued development of new strategies

23% - altered practices in how they interacted as team or with family

14% - built new connections with cultural or neighborhood-based resource
Follow-up Six Months After the Retreat - Connections with Community Resources

In year three, the follow-up telephone interviews occurred fully six months after the last retreat in order to test the impact. Even with this length of time the results echoed the earlier retreats:
- extremely high ratings of the benefit of the retreats
- confirmation that the retreat content had transferred to their work with children and families
- follow-through with contacting neighborhood resources had been strong
  - they had kept a great many of the materials at hand and used them regularly for referrals
  - they had suggested them to peers who sought their advice on how to help families they served,
  - they had made visits to these resources to form relationships and informal partnerships.

"As a result of the retreat, I collaborated with ECFE and started MOTHERead."

"I am better able to describe resources to families."

"On a regular basis I am still using the housing information from the very first retreat."

"I experienced a situation in my program in which the attributes of cultural sensitivity were not at all present. I sat down with a person from the community and learned many things - that we were offending the families without meaning to. After that discussion, we changed the program and now enrollment is increasing."

"When things unraveled for a particular family, I knew I had something to encourage her."

"What I gained was the difference healing language and methods can have."

The Benefit of Training Tailored to Urban Staff

Over and over, staff appreciated the rare opportunity to spend time with fellow urban interventionists on the topic of street-wise early intervention. Most conferences and training had dealt with subtopics such as autism or fetal alcohol effects. These retreats were so meaningful that many reported that they designed workshops of their own, placed materials in their staff and parent libraries, and contacted elected officials. In all, they reported that the retreats helped them look on the entire context of their work and their relationship to it.

"Listening to the stories of the families gave me really hopeful feelings. It was extremely meaningful to hear the practical ideas for those very stressful situations."

"I will try to change my manner, to find that center calm - to be responsive, not reactive."

"Will work on my pools of grief and stilling the static in my attic."

"I will make the decision to get more involved in my own community."

"...been doing this for 20 but this was a reincarnation of spirit."
PARTNERS IN PROGRAM DEVELOPMENT
Erie County Early Intervention Program
and Project Dakota Outreach

1995-1998

Introduction
Erie County, including Buffalo, New York, and surrounding communities is a lovely old community in the shadow of Niagara Falls. At present it is in general economic decline from a long reliance on industrial commerce. In New York Part H is a state program administered by local counties. Early intervention programs, in this county as in much of the state, are largely the work of hospitals and smaller private agencies under contracts with the county early intervention official. These contracts specify whether an agency may provide evaluations or direct service, with a few that can provide both functions. Service coordination for newly referred families is the domain of county staff. Evaluators are often separate agencies from those which provide direct services. It is not uncommon for families to have direct service providers who themselves come from several different agencies.

Project Dakota was invited in to help the county and the more than 1200 hundred families served by EI to experience more family-friendly practices and a shift from a highly center-based model to a menu of settings tailored to families and mindful of informal supports and inclusive settings.

Outcomes of Outreach
The divisions between service coordination, evaluation and service provision were not subject to change. However, during the course of three years of work together, remarkable transformations occurred:

. IFSP protocols were revamped for a more holistic view of the child and family.
. More than two-thirds of families served made the shift to home and or inclusive community settings for services.
. Early intervention costs were contained at a time of rapidly expanding enrollment.
. Directors formally committed by resolution to their own version of transdisciplinary teamwork.
. Eight teams were trained in transdisciplinary team practices (a collaboration between Project Dakota and Geneva Woodruff’s Project TOP in the last year).
. Service coordination, evaluation, and service provision practices were overhauled.
. A strong cadre of parent leaders was active in the LICC and was forming a support network.

Format of Outreach
The primary format of training and technical assistance in our eight trips was:
1. on-site training with large numbers of direct service staff and some families
2. orientation and debriefing sessions with program directors
3. preparation and follow-up with extensive consultation with county leadership
In the third year, Project staff intensively trained teams for TD work via demonstration TD assessments and IFSP's with detailed work on implementation practices for teaming, role extension, and role release. The parent member of the Project staff also conducted evening parent workshops which had a very strong influence on encouraging families voices.

Lessons Learned
1. The training was successful in large part due to the persistence and commitment of the lead county administrator.

2. The configuration of separate agencies for all EI functions was the greatest barrier and, to some extent, a great asset throughout this period. EI programs might specialize in a particular urban setting but in many cases covered the same territory as other programs. In early stages, this competitive market environment actually sped the rate of program development; programs that began to offer flex hours for evaluations, who had a team orientation that was friendly and competent got more referrals than programs that kept to more traditional, clinical services.

However, as the demand for cohesive teams increased, both county officials and local directors began seeing the need to begin to more seriously address geographic boundaries and to form partnerships with nearby programs so that they together could offer families more seamless services.

3. As an outreach project that spent its early years on trandisciplinary team training, we came to find ourselves adrift in IFSP - working tremendously hard to help shape program practices via team protocols for family-staff interactions and planning. We influenced the whole notion of IFSP in at least a dozen states. But, as we neared the end of our era, it became painfully clear that in the end, the best of family-centered TD team practices requires teams that commit to work together, to share a caseload, to reflect on a regular basis, "Did we really listen, did we really set up one another for success? How well did we adapt to their expressed and unexpressed cultural values and supports? There is no substitute for the creative energy that comes from highly committed professionals who understand the dance, the elegance for serving, with a fresh face and heart, each family that are graced to meet.

4. In short, great outreach is great chemistry between program leaders and outreach staff, a sense of tension between praise for what has been achieved and the push for greater performance, humbling times when resistance flares up to teach a lesson, and the deep satisfaction of leaving knowing that they speak of it all as their very own creation.
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