A Community of Practice: Partnership Prospers Between Providers and Parent Leaders in Washington State

By Kris Rydecki Ching and Christine Griffin

Whoever teaches learns in the act of teaching, and whoever learns teaches in the act of learning.
- Paulo Freire (1998), Pedagogy of Freedom

Improving services for our youngest deaf and hard of hearing children in Washington State has meant the creation of a professional learning community—or community of practice—for our professionals in early intervention for children who deaf or hard of hearing. In a state that has distinct geographical differences, these highly specialized professionals traverse mountain passes, expansive rural vistas, and agricultural countryside in order to support families of deaf and hard of hearing babies, toddlers, and preschoolers. In the metropolitan areas of the state, our early intervention professionals are often part of private specialized programs; in the rural areas, they often work alone.

Kris Rydecki Ching, outreach director for birth-5 at the Center for Childhood Deafness and Hearing Loss (CDHL), a statewide agency that provides services to deaf and hard of hearing children from birth to 22 years old, came up with the idea of creating a community for this group of professionals. She felt that creating a community of practice would help break down the isolation that easily occurs when professionals have to pursue their work alone.

The CDHL has provided opportunities for other professional groups to interact with each other, hosting several quarterly statewide videoconference meetings for educators and professionals in deaf education. We have offered statewide videoconferences for itinerant teachers of the deaf and hard of hearing, speech-language pathologists, educational audiologists, special education directors, and deaf and hard of hearing education program leaders.

Photos courtesy of Kris Rydecki Ching and Christine Griffin
directors. Our early intervention professionals have the opportunity to connect at the annual state Infant and Early Childhood Conference in Tacoma if they can manage to get there. However, until the development of the community of practice, they had no way to maintain regular contact with each other.

**Communities of Practice**

A community of practice has been defined as “a group of people who share a common concern, a set of problems, or interest in a topic and who come together to fulfill both individual and group goals” (Cambridge, Kaplan, & Suter, 2005). Communities of practice connect people who might otherwise be isolated in their interests or work. They offer opportunity for individuals who share a context, in our case working with families of deaf and hard of hearing children, and enable them to talk with each other about challenges and possibilities.

A community of practice allows for members to share information and knowledge and assist each other with solving problems; it facilitates the process of collecting and evaluating best practices while introducing collaboration among members (Cambridge, Kaplan, & Suter, 2005). In addition, communities of practice allow participants to identify items on which collective action can be taken, to focus attention on practices that could benefit from change, and to find ways to transform practices (Cambridge, Kaplan, & Suter, 2005). Within every community of practice, each member is viewed as an equal participant; information is shared equitably among members.

We planned for our community of practice to include early childhood teachers of the deaf and hard of hearing, speech-language professionals, listening and spoken language specialists, deaf and hard of hearing family mentors, and program administrators—all the varied professionals who were involved in visiting and working with families of deaf and hard of hearing children in their homes. By sharing resources, assessment tools, and home visit strategies, participants could

Above: A diagram of Community of Practice (Allan, 2008).

Christine Griffin, MEd, is coordinator of Guide By Your Side, a program of Washington State’s Hands & Voices, the parent-driven organization with chapters in the United States and Canada. She earned her master’s degree in adult education from Western Washington University, with a focus on parent engagement and involvement, and she has worked to support parents of children with special needs since 2006. Griffin has presented and trained family members and parent leaders both locally and nationally. She and her husband live in Washington State and are the proud parents of two young adult children who are deaf and hard of hearing; the story of her family, *Standing Up for Our Children*, was published in *Odyssey* in 2013. In 2016, Griffin was awarded The Seaver Vision Award from Hands & Voices.

The authors welcome questions and comments about this article at kris.ching@cdhl.wa.gov and gbys@wahandsandvoices.org, respectively.
provide and receive moral support from each other and discuss current research articles and topics of interest. Ching believed that providers would not only be less isolated but that they would gain new knowledge and build networking channels.

Coming Together
Partnering with Hands & Voices
The initial community of practice meeting of the early intervention professionals for deaf and hard of hearing children was held in June 2016. Some individuals arrived in person; those who could not attend, especially the professionals who live and work in central or eastern Washington, attended through videoconferencing.

As Ching brainstormed agenda topic ideas for the first meeting, she decided to call Washington State’s Hands & Voices Guide By Your Side coordinator, Christine Griffin, to invite her to present on parent-to-parent support services. Washington State Hands & Voices is a chapter of Hands & Voices, a parent-driven organization that supports parents and caregivers of children who are deaf, deaf-blind, and hard of hearing regardless of their choice of communication. Guide By Your Side is a program of Hands & Voices that matches new parents and caregivers with “parent guides,” individuals who are also parents of deaf, deaf-blind, and hard of hearing children and are trained to work with new parents to provide up-to-date information, resources, and peer support.

As they talked, Griffin inquired about the new community of practice and asked about the inclusion of parent guides, as these individuals also work with families in the home environment. Quite by chance, Griffin had been researching community of practice principles and practices for a course she was designing on the topic of nonviolence as part of her work in her final quarter of graduate school at Western Washington University. Griffin had been drawn to the community of practice framework because it allowed for the inclusion of individuals with varying backgrounds and skills. In communities of practice, no hierarchical structure exists and no specific skill set or skill level is required; to join, individuals need only share an interest in the subject—in our case early intervention with deaf and hard of hearing youngsters and their families—as well as share an interest in connecting with others and improving their own practices. Griffin saw the new community of practice as an opportunity for herself and others in the Guide By Your Side program to network with the early intervention professionals with whom they frequently partner to support families. To her, it seemed only natural that the community of practice include parent guides. This would help both the professionals and the parent guides as they teamed up to support families. They could learn from each other. In their discussion, Griffin explained this to Ching, asserting that including the parent guides in the community of practice would only benefit the participants, supporting the foundational belief that a community of practice is to empower all members. Griffin noted that this belief was rooted in adult educational philosophies that focus on equitable education practices (Elias & Merriam, 2005). Further, Griffin feared that if the parent guides were excluded, the isolation of professionals and providers would increase.

Ching had initially thought about including the parent guides as well as pediatric audiologists and early intervention family resources coordinators, but she had shied away from including them in a belief that she should “begin small.” Nevertheless, she responded positively to Griffin’s suggestion and gathered feedback from the other professionals about inviting the parent guides to community of practice
meetings. She wasn’t surprised that there were mixed feelings about combining professionals and parents in the same community of practice. Some believed that one group would not fully participate due to the other group’s presence. Ching had worked closely with a parent guide. Both had attended several preschool transition meetings in their respective roles, supporting children, their parents, and school districts. It was this working relationship and collaborative involvement that led her to also feel confident that the parent guides, who are also trained specialists working in families’ homes, should be included and that inclusion would strengthen ties and improve practices.

**Today**

Today we—the early childhood professionals who work with deaf and hard of hearing children and their families and the parent guides from Washington State Hands & Voices—are beginning our second year of investment in a community of practice. In our first year, we had four meetings, with over 30 participants on the e-mail list that covered the state. At each meeting there have been 12 or more attendants, both in person and virtual. As part of a foundation, they worked together to develop “relationships of trust, mutual respect, and reciprocity” (Cambridge, Kaplan, & Suter, 2005), necessary for a strong community of learners. Discussions led to decisions to focus on the transition process from early intervention to the early stages of education. We agreed that students need appropriate supports and services during this important time.

This year we have continued these meetings at locations around the state at different deaf and hard of hearing early childhood program locations for those who can attend in person and using Zoom teleconferencing to include individuals who are not able to be physically present. This has allowed us to learn more about what each program offers and to tour individual sites. Our agendas cover announcements and updates as well as support time to focus on and talk through difficult home visit situations, problem solving, and reviewing research articles.

As our meetings continue and we share information, we move into deeper levels of inquiry and learning as a group—a process that is shown in the community of practice diagram (Allan, 2008). Other activities to support deaf and hard of hearing children and their families are underway. We are expanding services, events, and activities for children and families as well as professional development for staff. We have regional deaf and hard of hearing family night events, and we offer parent leadership workshops and training.

While this is underway, our community of practice has worked to develop trust among a variety of providers and family leaders; it continues to create a space where we can share with and learn from each other. When we come together, we bring our different backgrounds and individual perspectives, and we keep the focus on our commonalities. We all want to improve outcomes for children and families. We will continue to grow and learn together, expanding partnerships and developing stronger relationships with high expectations for positive change. We know that it takes a village, and we continue to create our village—and at its heart is our community of practice.

**References**


**Resource**