



What Concerns You?

Module: III
Topic: Special Needs
Type: Reflection and Discussion
Group Size: Individuals and Large Group
Time: 20-40 minutes depending on number of participants and amount of discussion

Purpose:

To help caregivers recognize:

- the difference between behaviors that may challenge or frustrate caregivers but are frequently part of healthy development, and behaviors that might indicate the child has a medical problem, developmental delay, and/or special need.
- some of the emotions involved for both parents and staff when considering and discussing the possibility a child has medical problem, developmental delay, and/or special need.

What you will need:

Participant Materials	Trainer Materials	Equipment
<p>The following handouts: :: <i>When Concerns Arise (worksheet and key points)</i></p> <p>Optional: :: A good developmental chart for infant/toddler development</p>	<p>:: Two easel pad pages :: Tape or 2 easel pad stands :: Easel pad markers</p> <p>Optional: :: Transparency for opening activity. :: A good developmental chart for infants and toddlers</p>	<p>Optional: :: overhead projector :: screen or blank wall</p>

Directions:

Before workshop begins:

Prepare a two easel pad pages by writing one of the following headings on each page:

Typical

Atypical

As participants arrive:

1. Place opening activity instructions on overhead projector (optional).
2. Welcome participants and give them the handout, *When Concerns Arise*.
3. Draw their attention to the activity at the top of the page and invite them to start working on it individually or in small groups.

During the workshop:

(Follow-up to first column)

1. Invite participants to share their responses from the first column of the opening activity.
2. Ask for two volunteers to record responses on easel pages. Assign each volunteer to one of the two pages and provide them with colored markers.
3. With each behavior shared, ask the age of the child and invite the group to determine if the behavior is within the range of typical development for a child that age.
4. According the decision, a volunteer record the response on the appropriate easel pad page.
5. Depending on the number of participants and answers, decide if you will solicit everyone’s responses or only a sampling. It would be possible to wrap up this step by asking if there are any more behaviors on anyone’s list they would place on the “atypical” list.
6. Ask about/discuss the difference in the type of responses we should have to behaviors on the two different lists. Remind participants of the importance of understanding child development and behaviors that, frequently, are part of the developmental process. While some of these behaviors can be frustrating, they play a role in the child’s development. It is important to know how to work with those behaviors in respectful, responsive ways. However, behaviors from the “atypical list” should be responded to differently.

7. Discuss what these responses might include (continued observation and responsiveness; on-going conversations with parents and discussing concerns; medical exam; possible referral for assessment; etc.) Emphasize the importance of the “watch, ask, adapt” process in understanding and responding to needs and behaviors. (Is the behavior due to an unmet need; lack of fit; lack of experience; etc. that can be addressed in the group care setting?)

(Follow-up to second column)

8. Invite participants to share their responses from the second column of the opening activity
9. Acknowledge the emotions involved, for parents and staff, when discussing concerns about a child. If the PITC topic of “protective urges” has been covered with participants, it could be helpful to bring that into the discussion.
10. Stress the importance of early identification if there really is a problem.
11. Provide information on resources for staff and parents when considering a referral for assessment. Consider having a disabilities specialist participate in this part of the workshop.

Note: Key PITC concepts may be covered as an introduction to the workshops or may be referred to and woven in individually as they apply to the content being covered in the activity.

Variations:

:: Include print materials on developmental warning signs.

:: Follow this activity and discussion with information on how to talk with parents when staff has a concern about a child’ health and/or development.

:: Consider using the article, “Conferring with Parents When You’re Concerned That Their Child Needs Special Services,” Carole F. Abbott and Susan Gold, *Young Children*, May 1991. See PITC PQ activity, “When Concerns Arise.”

:: The first column of the activity, and the related steps, could be used with other PITC modules and topics, when covering specific areas of development such as, social emotional development, language development, etc.

Links to Head Start Program Performance Standards:

:: 1304.20(d) “. . . identify any new or recurring medical, dental, or developmental concerns so they may quickly make appropriate referrals.”

:: 1304.20(e)(1) “Consult with parents immediately when child health or developmental problems are suspected or identified;”

:: 1304.21(a)(2)(iii) “Guidance: . . . Encourage parental input from observations at home or in the program, so that parents can share information with staff;”

Activity Developed by:

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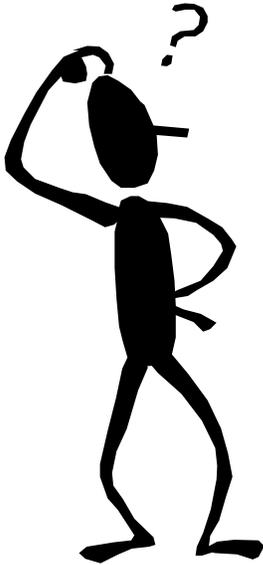
Source Material:

WestEd. (2000). The Program for Infant/Toddler Caregivers’ *Trainer’s manual, Module II: Group care* (2nd ed.). Sacramento, CA: California Department of Education.

Opening Activity ~ What Concerns You?

Please find the following questions in your handout packet and answer them. You may do this individually or discuss your answers with a partner.

1. What are some of the behaviors (present or absent) in a child that have caused concern for you as a provider or parent?
2. Was it difficult for you to share these concerns with family members or co-workers? If so, why?



Adapted by Cheri Longaker, WestEd, *The Program for Infant Toddler Caregivers*.
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WHEN CONCERNS ARISE

Opening Activity ~"What Concerns You?"

Please answer the following questions. You may do this individually or discuss answers with a partner:

1. What are some of the behaviors (present or absent) in a child that have caused concern for you as a provider or a parent?

2. Was it difficult for you to share your concerns with family members or co-workers? Why/why not?

KEY CONCEPTS

1. Most children develop at about the same rate and in the same way as other children of the same age and culture. For some children, however, the quality or rate of development may differ significantly from their peers.
2. Differences in development may be due to differences:
 - a. in the opportunities to learn
 - b. in cultural expectations
 - c. within the child
3. Caregivers and family members are the most obvious persons to be involved in recognizing a possible delay in development.
4. When concerns about a child arise, the PITC "Watch, Ask, Adapt" process is valuable as an integral and responsive part of the informal assessment process.
5. The initial identification of developmental concerns generally has an emotional effect on families and providers.
6. Sharing concerns with family members should be done in a carefully planned and non-threatening, non-judgmental manner
7. In order to address concerns in a child, providers and families have different roles in accessing systems, *with family members in the lead.*