

# Beginnings Guides Implementation Training



The *Beginnings Guides Implementation Training Curriculum* includes:

- Content for stages of pregnancy and child development to age 3
- Scientifically accurate, rigorously reviewed, easy-to-read materials for home visitors and parents - the ***Beginnings Guides***
- Reflective teaching/coaching and supervision strategies
- Practice and supervision tools
  - Reflective Questions
  - Reflective Drawings & Coloring Conversations
  - 1-minute health literacy screen and referral
  - Intervention Planning
- Training in effective, efficient use of materials, strategies and tools
- *The Life Skills Progression Instrument (LSP)* - A validated, quick-and easy-to-use scientific instrument for measuring individual mother's and child's progress toward family goals, and program progress toward desired results and long term outcomes. The LSP is also an intervention planning tool useful in reflective supervision.
- Database software program for LSP data analysis and reporting of program effects at the individual, family, caseload and program levels.
- ***Beginnings Home Visitors Handbook***

## **Reflective Functioning**

Reflective functioning is an essential life skill at the core of mothering. It has significant effects on child brain development, school readiness and family functioning. A mother's reflective skills determine whether her child learns from her by default or by design. Reflective functioning is the capacity to think about and see the link between events, a person's behavior, feelings and knowledge, and to respond appropriately. In short.... Think, Link & Respond

***Example:*** If you have strong reflective functioning skills, when your baby cries you intuitively wonder what the behavior (crying) means. You look for links between the crying and what happened. You wonder what the baby might be thinking. You reflect on what you know that might explain the crying. You think through the possibilities. You

find a solution. You choose an appropriate response. You function reflectively. In short, you Think, Link & Respond.

**Resources:**

Fonagy, P. (1999) Transgenerational Consistencies of Attachment: A New Theory. Paper to the Development & Psychoanalytic Discussion Group, American Psychoanalytic Association Meeting, Washington, DC

Pawl, J. (Feb/Mar 1995) The Therapeutic Relationship as Human Connectedness: Being held in another's mind. ZERO TO THREE, Washington, DC.

**Health Literacy**

Literacy refers to a set of skills including reading, writing, speaking, listening, and using numbers. The US Institute of Medicine defines these same skills, plus background knowledge, as necessary to use the healthcare system. Parents pass on their literacy skills, whatever they are, to their children. When parents lack these skills, it greatly increases the risk of reading and learning difficulties for their children.

Literacy skills are the foundation for functional health literacy – what a person's literacy skills enable them to do in the health arena. So, simply stated, health literacy is the capacity to function in the health arena—that is, in the healthcare system and in health contexts at home. A mother's health literacy skills determine her ability to benefit from your program, healthcare and community services.

Resources:

Bennett IM, Robbins S, Haecker, T (Sept 2003) Screening for Low Literacy Among Adult Caregivers of Pediatric Patients. *Family Medicine*, 35(8):585-90

Nielson-Bohlman L, Panszer AM, Hamlin B, Kindig DA (2004) Editors. *Health Literacy: A Prescription to End Confusion*. Institute of Medicine, National Academies Press,

**TED\* (\*The Empowerment Dynamic)**

Many clients of home visitation programs have good reason to consider themselves victims. Many home visitors are encouraged to rescue these clients. But rescuing breeds dependence and so defeats the purposes of home visiting. [TED\\* The Empowerment Dynamic](#) is an effective escape from the victim - rescuer drama.

TED\* is the work of David Emerald, teacher, facilitator, coach and consultant with a passion to help improve people's capacity for living and working together. TED\* is the antidote to Stephen Karpman's Drama Triangle, and the key to 'doing' life by choice instead of 'being done to'.

Resources:

Emerald, D. (2006) *The Power of TED\* The Empowerment Dynamic* (2006) Polaris Publishing, Bainbridge Is. WA [www.PowerofTED.com](http://www.PowerofTED.com)

Karpman, S. (2002-2004) The Drama Triangle. <http://www.mental-health-today.com/articles/drama.htm>

**Topic Index**

Topic Indexes in English and Spanish list all the content of the *Beginnings Guides* in alphabetical order by topic. The Indexes enable you to quickly locate information and respond to a parent's immediate interest and need, and to easily plan a visit. The Topic Indexes for the [Pregnancy Guide](#) and the [Parent's Guide](#) are located in the *Beginnings Home Visitors Handbook* along with a [List of Illustrations](#) for each *Guide*. Each trainee

receives a *Handbook* and practices using it during the *Beginnings Guides Implementation Training*.

### **Teaching Documentation Log**

The Teaching Documentation Logs in English and Spanish list all the content of the *Beginnings Guides* in order as it appears in the materials, along with spaces to date, initial and check off topics that you discussed during a visit. The Logs enable you to quickly document topics you covered and see at a glance what remains to be discussed. The Logs also are useful for visit planning and to assess how consistently your program's priority topics are being addressed. The Log is typically kept in the client record. Training sites receive a CD containing the Teaching Documentation Log masters along with permission to reproduce as needed for program purposes.

### **Reflective Questions**

Reflective questions lead a mother to observe her situation, give her a way to think about it, and enable her to draw on her own experience and knowledge to devise solutions. We developed scripted reflective questions linked to the *Beginnings Guides* curriculum with a grant from ZERO TO THREE for use by home visitation, school readiness, WIC and family support programs serving pregnant women and parents of very young children. A practical process for learning skillful use of reflective questions starts with using scripted questions that are part of the *Beginnings Guides* curriculum and progresses to spontaneously formulating questions that help a parent Think, Link & Respond.

Resources:

Parlakian R (2002) *The Power of Questions: Building Quality Relationships with Infants and Families*. ZERO TO THREE, Washington, DC. [www.zerotothree.org](http://www.zerotothree.org)

Obrien, RS, Baca P. (1997) Application of Solution-focused Interventions to Nurse Home Visitation for Pregnancy Women and Parents of Young Children. *Journal of Community Psychology* 25(1):47-57

### **Reflective Drawings & Coloring Conversations**

Reflective Drawings© are a deceptively simple, powerful method to promote mothers' reflective functioning skills. A drawing is linked to the content of each booklet in the two series of *Beginnings Guides* (pregnancy and parenting). Each drawing is designed to convey a key concept without words. They are especially useful for clients with low literacy skills. Artist [Laurel Burch](#) created the drawing under our direction.

When you invite a mother to color a Reflective Drawing, you invite her to dream ahead – to imagine and plan her positive future. You give her time and permission to think about herself as a mother, to reflect on her childhood and how she wants her child's experience to be similar or different. Your invitation to color a [Reflective Drawing](#) is a way to hold up the mirror for a mother so she can see herself in a new way, with new skills and new dreams.

Coloring Conversations© set up a thinking and sharing quality to your visit. Side-by-side conversations during the coloring are deeper and more intimate than your usual face-to-face discussions. The process leads the mother to speak from her heart. She may offer new information or become aware of previously unrecognized needs.

This is a powerful process. Before implementing Coloring Conversations, training sites must have protocols in place for recognizing and reporting high risk conditions, and referral relationships to manage the risks and needs that this reflective process may reveal.

Training is required to use the Reflective Drawings. Training sites receive a CD containing the Reflective Drawings masters along with permission to reproduce as needed for program purposes. The *Beginnings Home Visitors Handbook* shows thumbnails of each drawing along with a description of the concept(s) conveyed and links to related information in the *Beginnings Guides*.

Contact Sandra Smith, MPH, PhD [SandraS@beginningsguides.net](mailto:SandraS@beginningsguides.net) for more information or call 800-444-8806