Communication? Don’t Ask!

By Dr. Gina Barreca

When the editors of this newsletter approached me and asked me to write something about communication, they suggested the topics might be “communicating with young children” or “communicating with colleagues.” Since I see both of these activities as requiring the same skill level or, to put it more frankly, to be almost the same thing, I figured I could address both.

As far as I can tell, the only real difference between patterns of communication between the two groups is that it is FAR more fun trying to communicate with small children.

When little children make faces, for example, they make them deliberately and consciously—unlike one’s colleagues. You know for a fact that when kids roll their eyes or squish their faces into bizarre expressions, that they are attempting to invoke a certain reaction. You’ll laugh. Even if you are not amused, you will at least have stopped talking, however briefly. Their goal is achieved.

This is not the case with one’s colleagues. Speaking to a coworker who, in the middle of a conversation, attempts to suppress a huge yawn by widening his eyes and pulling down his chin, communicates something, true. What the gesture communicates, however, is something along the lines of “I’ve been up since 6 a.m. and the last thing I need to do is listen to your theory concerning the connection between finger-painting and the limbic brain.” You will probably neither laugh nor stop talking, because your role is to ignore the signal. It would be impolite to shout “Just yawn for Pete’s sake, will ya?” Nobody’s goal is achieved.

When small children wiggle their ears, it’s cute. When a colleague suddenly starts twitching her nose like an extra from “Bewitched,” it’s just scary.

For the most part, I genuinely love my colleagues. It’s just that quite often it would be easier and more satisfying to talk to an inanimate object, such as a cigar box or stapler. Goodness knows that we try—really, genuinely try—to understand each other. It’s just not easy.

Take, for example, the whole idea of “mentoring,” which is a big issue. Like everybody else, I want to think of myself as supportive and encouraging of the next generation. Yet if I offer to “be there for somebody,” I do expect it to be on my own terms. Occasionally this has caused strife because my idea of support was not quite what a younger colleague expected. And part of the problem lies with the very terms that we use because a phrase such as “being there for someone” is necessarily vague and can be disastrously confusing.

This article is translated into Spanish on page 2. Ver la versión española de este artículo en la página 2, y todos los artículos a www.birth23.org.
We should adopt a different model. We should take it back to where it started.

Let’s face it: at least with a child under four, “being there for somebody” means actually sitting down on a rug with your hands in the Play-Doh and glue in your hair. Little ones actually just want you to be there; object permanence is what’s important. It would have been more fun and more useful for me to sit on my co-worker’s rug and play with Barbies than it was for me to offer vague platitudes. Eye-contact, a pat on the back, a hug, the smile of delight, and the shared laugh-out-loud of sheer pleasure are the best and most direct signals of communication, after all.

Having said all this, I think it takes a different kind of patience to work with the youngest group. A person must have a different kind of gift to communicate with small children (as opposed to those of us who work primarily with their grown-up imitators). That is a gift I do not have. I’m not cut out to work with young children, especially not the under-three crowd, not even as an amateur. I can’t even play peek-a-boo for more than ten minutes at a time because I would just want to tell the kid, “Sweetheart, trust me: every time you open your eyes, it’s always going to be me.”

You’ve got to have a way with people of all ages if you’re going to work with young children; the ability to make a newer member of the human race feel at home is done by those who have been given a special place in the world. If we’re fortunate, we are certain that our colleagues share our enthusiasm. And even if we need to work on communicating this fact in words or, dare I say, facial expressions, it’s worth the effort to try.

Dr. Gina Barreca is Professor of English at The University of Connecticut and author of six books, including THEY USED TO CALL ME SNOW WHITE BUT I DRIFTED and BABES IN BOYLAND: A Personal History of Coeducation in the Ivy League. Her next book will address issues in education from a humorous perspective.

¿Comunicación? ¡Ni preguntas!

por la Dra. Gina Barreca

Cuando los editores de este boletín me abordaron pidiéndome que escribiera algo sobre comunicación, sugirieron dos temas: comunicación con niños menores o comunicación con colegas. Como considero que ambas actividades requieren el mismo nivel de aptitud, o para decirlo con más franqueza, son casi la misma cosa, decidí que atacaríamos las dos.

En cuanto al patrón de comunicación, lo más que puedo decir es que la única diferencia entre los dos grupos es que es mucho más divertido tratar de comunicarse con niños pequeños.

Cuando un niño pequeño hace muecas, por ejemplo, las hace deliberadamente y conscientemente – a diferencia de los colegas de uno. Cuando el niño pone los ojos en blanco o arruga la cara con expresiones raras, es que trata de provocar una cierta reacción. Uno entonces se rie aunque no le haga gracia, y al menos por un momento deja de hablar. Para el niño: misión cumplida.

Tal no es el caso con los colegas de uno. El interlocutor que en mitad de una conversación trata de contener un gran bostezo abriendo los ojos y bajando el mentón, comunica algo, cierto. Lo que el gesto comunica es algo como “estoy levantado desde las 6 a.m. y lo último que necesito es escuchar tu teoría sobre la relación entre pintar con los dedos y estar en el limbo”. Uno probablemente ni se ríe ni deje de hablar porque su papel es ignorar la señal. Sería descortés gritarle “¡suelta el bostezo!” No hay misión cumplida.

Cuando los niños pequeños mueven las orejas, es una monería. Cuando a un colega se le ocurre torcer la nariz como un extra del programa de televisión Embrujada, lo que produce es susto.

No es que no le tenga genuino cariño a mis colegas. Es que a menudo es más fácil y más satisfactorio dirigirle la palabra a...
un objeto inanimado como una caja de tabacos o una grabadora. Dios sabe que tratamos – de verdad tratamos – de comprendernos unos a otros. No es fácil.

Tomemos por ejemplo, la idea de “ser mentor”, tema importante. Como todo el mundo, quiero pensar que doy apoyo y aliento a la nueva generación. Sin embargo si me ofrezco diciendo “que cuente con uno”, me ofrezco diciendo “que cuente conmigo”, espero que sea bajo mis condiciones. O casionalmente esto ha sido causa de disensión porque mi idea de apoyo no era la que esperaba mi colega más joven. Y parte del problema está en los propios términos que usamos porque una frase como “contar con uno” es necesariamente vaga y puede causar confusión.

Debemos adoptar un modelo diferente. Hay que empezar de nuevo.

Reconozcámoslo: al menos con un niño de menos de cuatro años, cumplir el “que cuente con uno” significa en realidad sentarse uno en una alfombra con las manos en el “Play-Doh” y pega en el cabello. Los pequeños realmente quieren que uno esté allí, eso es lo importante. Sería más divertido y útil para uno sentarse en la alfombra de la colega y jugar con Barbies que ofrecer vaguedades. El contacto ocular, la palmada en la espalda, el abrazo, la sonrisa de satisfacción y una carcajada de placer compartida son después de todo los signos de comunicación mejores y más directos.

Dicho todo esto, creo que se necesita una clase diferente de paciencia para trabajar con el grupo más joven. Hay que tener un don especial para comunicarse con los niños pequeños (en oposición a esos de nosotros que trabajamos principalmente con sus imitadores adultos). Es un don que no tengo. No estoy hecha para trabajar con niños pequeños, especialmente los de menos de tres años, ni siquiera como aficionada. No puedo siquiera jugar a simular esconderme por más de diez minutos seguidos porque tendría que salir y decirle al muchacho “corazón créeme, cada vez que abras los ojos es a mí a quien vas a ver”.

Uno tiene que tener un estilo para lidiar con gente de todas las edades si va a trabajar con niños menores, la capacidad para lograr que un miembro más reciente de la raza humana se sienta cómodo cuando les tienen quienes han recibido un lugar especial en el mundo.

Si tenemos suerte estamos seguros de que nuestros colegas comparten nuestro entusiasmo. Y aun si tenemos que esforzarnos para comunicar esta realidad con palabras o con expresiones faciales, me atrevo a decirlo, vale la pena tratar.

La Dra. Barreca es Profesora de Inglés de la Universidad de Connecticut y autora de seis libros, entre ellos M E LLAMABAN BLANCA NIEVES PERO ME DESVIÉ, Y CHICAS EN PAÍS DE CHICOS: Una historia personal de la enseñanza mixta en la “Ivy League”. Su próximo libro sobre temas de pedagogía tendrá una perspectiva humorística.
Communication that Works

By Sally Huck

My husband and I have a four-year-old daughter who received services through Birth to Three. She is now attending a special needs preschool program in our school district. Open and direct communication between my husband, myself and the teachers and therapists working with our daughter is very important to us. I try to organize my thoughts prior to an appointment or meeting with providers. During our time with Birth to Three, I would ask the therapist when she first arrived if we could take five minutes at the end of the session to discuss issues. Now, I bring a ‘Parent’s Agenda’ to PPT meetings with a list of topics and questions that I would like covered. That way the school team can anticipate how long the meeting might be, and what issues are of most interest to my husband and me.

Parents and providers together form the team that develops the appropriate program for a child, and we have always strived to both give and receive suggestions and feedback about what’s working, or not working, for our daughter. I envision my husband, myself, and the providers that work with our daughter as co-captains of her developmental plan, so we have to be in constant communication.

Feel comfortable asking providers questions if you don't understand why they are recommending a strategy, and be sure to tell them if it's not working for you at home. I did not know how to help my daughter when she first starting receiving services, but I learned early on that my parent intuition is often right. Providers need to know about how a child behaves, plays, and learns when they are not around, and need to understand your parenting style. When we have disagreed with a part of our daughter’s plan or particular strategies being used, we have voiced our concerns. Usually, I start the conversation by recapping what I think is working, and then state the facts about what the problem is. If a provider encourages us to keep trying the same plan, I ask for other ways to accomplish the goal or agree to try again with the understanding that we will evaluate the outcome in a certain amount of time. Parents can ask the provider to brainstorm with his or her colleagues for ideas. Many times I have contacted other parents for advice and shared the suggestions back to the provider at the next appointment. I make a point to share my daughter’s successes with the providers since they have certainly helped my daughter reach her developmental milestones!

Talking with providers in these ways helps to build a parent-provider partnership that ultimately benefits our children.

Sally Huck is a newly elected member of the Board of Directors for the CT Parent Advocacy Center, a statewide non-profit organization that offers information and support to families of children with any disability or chronic illness, age birth-21.

TOGETHER WE WILL:
Collaborate to Build Language, Communication and Relationships to Meet The Needs of Young Children

Friday, April 7, 2006
9:00 AM-3:30 PM
Crowne Plaza, Cromwell

- language and literacy
- technology in language development
- oral language and literacy
- dispute resolution
- facilitating quality communication with families
- working collaboratively with health care providers
- facilitating friendship in inclusive classrooms

Call Jennifer Sharpe 860-632-1485 X 268 or visit www.ctserc.org for more information

Registration waivers as well as stipends for transportation and child care are available for families of children with disabilities.
A Collection of Communication Tips for Providers

Submitted by Birth to Three and preschool special education providers, Marilyn Boehm, Marlene Cavagnuolo, Susan Davis and Kristen Milardo

Providers should use active listening—active listening helps to clarify what has been said. Using active listening helps the provider to listen more carefully and to be sure what they heard is what the parent meant to say.

Teams must remember it is the parent and child’s house and try to accommodate the family’s style as much as possible.

I use a fill-in-the-blank questionnaire with cartoon characters from TACTICS at Florida State University which helps the parent and provider focus on the child in a fun format. (Check out the Resources section below for more information on TACTICS.)

A daily communication notebook is helpful because it allows parents to provide teachers with information that may affect the student’s day. Also, it provides a way for teachers to share the student’s day with parents. We have found that the most useful information is specific rather than general in nature.

Many of our students have communication delays that interfere with their ability to go home and relate events about the school day. We have found it helpful to take a few digital pictures of the student doing something in school so that a visual aid is available for parents to begin conversations with their children about their day at school. We consistently find that visuals are essential. We do believe it is imperative, however, for teams to collaboratively determine what works best for each student; the iconic pictures available on computer programs are very helpful and liberally used, but for some students, digitals of actual people and objects are needed.

Given our reliance upon things like digital cameras, our staff has found that writing RFPs for various grant projects has resulted in some additional equipment for us.

Teams should be culturally diverse so there are members who can say some things that others may not, or can sense how the family may feel about something when no words are used.

Scheduling team meetings with families can sometimes be difficult, especially for those that have busy schedules or children in daycare. Scheduling team meetings around the dinner hour can be helpful—ordering a pizza or simple dinner can make it an easy and informal way for all to get together to discuss progress, concerns, etc., and also relieve the stress of that family having to make dinner for that night.

Books:


Weitzman and Greenberg. Learning Language and Loving It: A Guide to Promoting Children's Social, Language, and Literacy Development in Early Childhood Settings. Second Edition. This guidebook provides a step-by-step approach to promoting children's social, language and literacy development in early childhood settings. This resource is for teachers, speech-language pathologists and others who are responsible for creating learning environments that maximize children's language, social and literacy skills.

Websites:
http://tactics.fsu.edu/index.html. Website for Therapists as Collaborative Team Members for Infant/Toddler Community Services. The website has several printable newsletters.

http://fgrbi.fsu.edu/. Website for Family-Guided Routines Based Intervention. Go to resources and check out Getting to Know Your Child and the Pyramid Activity Tool.

http://www.hanen.org/Hanen2002/pages/LearningResourceCentre/BooksVideosAndOtherMaterials/BooksVideos. Check out this site for other resources.
Birth to Three System Update

By Linda Goodman, Director
CT Birth to Three System

I’m often asked by parents to explain how we know whether each of the 33 Birth to Three programs is doing a good job. Over the past four years, we have had an extensive quality assurance process. First, each program assessed itself against a long list of standards. Then, between four and eight Birth to Three staff visited each program to review records, interview the administrator, interview staff, and, with the assistance of parents, interview families receiving services from the program. If issues of quality or compliance with the law were found, the program wrote an improvement plan describing how they would correct serious issues immediately and how the program would gradually improve in any areas identified as needing improvement. Although this process was very comprehensive and allowed us to meet many staff and over 400 families, it was also an extremely time-consuming and expensive process. Without returning to the program for another review of records or face-to-face interviews, it was difficult to document that a program had improved.

An alternative is to select just a few important indicators for which we have data available and to measure programs continuously against their similarly-sized colleagues in order to tell when progress has been made. So, working with the State Interagency Coordinating Council, we have selected three indicators:
1. Do new families have an IFSP in place within 45 days of referral?
2. Do families receive all of the services on their IFSP in a timely way?
3. Are children referred to their school districts early (by age 30 months) and are transition conferences with the school districts held on time (at least 90 days before the child’s third birthday)?

We compare the programs on each of these indicators (those results are posted on the Birth to Three website: www.birth23.org). Then we select the programs that seem to be in need of the most improvement for each indicator in each size group. Those programs are visited by a team consisting of one Birth to Three staff person and a group of parents who then ask many, many more questions that we hope get beyond the numbers and really look at the quality involved in initial evaluations and IFSPs, service delivery, and transition.

Birth to Three State Interagency Coordinating Council Retreat Update

By Lolli Ross, State ICC Chair

On September 19, 2005, twenty members of the Interagency Coordinating Council and seven Birth to Three staff participated in a daylong retreat facilitated by Doreen Marvin, Director of Development from LEARN. Since the last ICC retreat held in June 2001, the Birth to Three System has faced many challenges, as well as experienced many successes. Members of the Council have worked to advise and assist the System through it all, and sought to develop a common vision, priorities, goals, and action plans for the next six months to two years.

Participants addressed the following key questions:
• What is currently happening in Birth to Three and the ICC that is driving the need to redesign the current operational mode of the ICC?
• How is the definition of success changing for the ICC and Birth to Three and how is it impacting the ICC?
• Who and what are the elements of the Birth to Three System and who/what do they impact?
• Who are the stakeholders in the Birth to Three System? What do they expect to get from it? What can they give to it? What degree of influence do they have over it?
• What are the influences on the ICC that challenges its role in advising and assisting the Birth to Three System and having more influence in setting policies and regulations?

(Continued on page 7)
Preschool Special Education Update

By Maria Synodi, Coordinator, Preschool Special Education

Monitoring, Technical Assistance and Enforcement... those words are the title of a new provision in the reauthorized Individuals with Disabilities Education Act (IDEA). The IDEA 2004 created a new system called Monitoring, Technical Assistance and Enforcement. This new federal provision requires the Secretary of the U.S. Department of Education to provide oversight of the special education system in states and enforce the provisions of IDEA when necessary. It also requires that States monitor and enforce school districts in their implementation of the provisions of IDEA.

As a first step, IDEA has required that States submit a State Performance Plan (SPP). The SPP is a mechanism for the federal government to gather information and ultimately evaluate State efforts in implementing the requirements and purposes of the IDEA, namely the provisions of special education and related services to eligible children and students ages 3-21. The plan must describe how the State will work to improve special education over a period of six years. On an annual basis States will evaluate their progress and report those findings to the federal government.

There are three major areas out of a required twenty that apply specifically to children ages three through five with disabilities. The three areas include the Least Restrictive Environment (LRE) for children three through five, transition from the Connecticut Birth to Three System, and the reporting of child progress on developmental and functional outcomes.

Connecticut will collect data from each school district on a yearly basis and will use that information to monitor how individual school districts are doing in these areas. On an annual basis, IDEA requires Connecticut to report to the public on how individual school districts are performing. That same information will be used to show the federal government how Connecticut is doing in these same areas.

This fall stakeholders from across Connecticut representing various groups assisted the State Department of Education in finalizing Connecticut’s SPP which was ultimately submitted to the U.S. Department of Education, Office of Special Education Programs (OSEP) on December 2, 2005. The Secretary of the U.S. Department of Education has 120 days to review and comment on Connecticut’s SPP. The State Department of Education anticipates hearing that Connecticut’s SPP has been approved sometime in April 2006.

Keep your eyes peeled for more information on Connecticut’s SPP.

These questions were explored in depth within small groups that then shared their work with the members at large. Issues were reviewed, discussed, and refined. As a result of this difficult but necessary work, the ICC will move toward a more streamlined focus for their identified priorities: Legislation and Finances, Quality Services, and Building Relationships. New committees will be developed around these priorities. Council members will commit to serving on one of these committees and ICC meetings will be run differently to accommodate the ongoing work of the committees.

To learn more about the strategic plan and the current goals of the ICC, please join us at one of our meetings or contact State ICC, c/o Eileen McMurrer CT Birth to Three System at eileen.mcmurrer@po.state.ct.us or Lolli Ross, ICC Chair at ross@arc.greenwich.org.

A special welcome to our newest members of the ICC! Clara Gutierrez, Parent Elise Minor, Parent Jeannie Mazzaferro, Parent Elayne Thomas, Parent Deborah List, Parent Louis Tallarita, State Dept. of Education Anita Cella, Parent DeAnna Lia, Dept. for Children and Families Maura Provencher, Parent Rep. Jack Thompson, legislator

2006 State ICC meetings:
Feb. 27
April 10
June 12
August 14
October 16
December 11
(subject to change; visit www.birth23.org for directions and updates as appropriate)
### Early Childhood Workshops

For all of the following, contact Jennifer Sharpe at SERC 860-632-1485 X268 or go to the SERC website (www.ctserc.org) to obtain a registration form. There are registration fee waivers available for families for most of these events. All of the workshops are scheduled for 9:00 AM – 3:30 PM:

<table>
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<tr>
<th>Date</th>
<th>Event</th>
<th>Location</th>
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<tbody>
<tr>
<td>January 18/19</td>
<td>Applied Behavioral Analysis Curriculum, and Methodologies for Young Children with Autism</td>
<td>Crowne Plaza, Cromwell</td>
<td>$75</td>
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<tr>
<td>January 25</td>
<td>Science and Literacy: making the Authentic Connections</td>
<td>Crowne Plaza, Cromwell</td>
<td>$40</td>
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<td>January 28</td>
<td>Make and Take: Mathematics and Literacy in the Early Childhood Classroom</td>
<td>SERC, Middletown</td>
<td>$25</td>
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<tr>
<td>February 1</td>
<td>My First Social Stories: How to Teach Social Understanding to Young Children with ASD</td>
<td>Hilton Garden Inn, Windsor</td>
<td>$30</td>
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<tr>
<td>February 3</td>
<td>Diagnosing Childhood Apraxia of Speech in Children Under Three</td>
<td>Crowne Plaza, Cromwell</td>
<td>$40</td>
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<tr>
<td>March 4</td>
<td>Make and Take: Integrating Literacy into Your Science Center</td>
<td>SERC, Middletown</td>
<td>$25</td>
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<td>March 8</td>
<td>We can Teach them All: Using the Preschool Curriculum Framework and the Preschool Assessment Framework to Develop IEPs</td>
<td>SERC, Middletown</td>
<td>$35</td>
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<tr>
<td>May 26</td>
<td>Assistive Technology for Children under the Age of Three</td>
<td>NEAT Marketplace in Hartford</td>
<td>No registration fee</td>
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Contact Kathy Granata 860-418-6146 or print out a registration form from the Birth to Three website (www.birth23.org) under “Personnel Development”.

March 21, 2006
Greater Hartford LICC
Transition from Birth to Three to preschool special education.
5:30 – 8 PM childcare provided
Contact Lana Raymond 860-263-2521