



Alberta Home Visitation Network Association

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## Message from the Director

"You can't go back and change the beginning, but you can start where you are and change the ending." — C.S. Lewis

This past year has been an amazing year for all of us, especially those in the family education field in Alberta.

With Alberta Children's Services asking agencies to submit Expression of Interests at the end of the 2019-20 fiscal year and new contracts awarded under the new Family Resource Network model, we truly are on an adventure of providing support for the families in Alberta. We can bring some of the knowledge and experience we have gained over the past 20 years into this new opportunity with a new model. Within the Family Resource Networks, the home visitation program spokes are integral to providing support for families with children ages zero to six years.

Alberta Children's Services has set about to ensure that all provincially funded home visitation programs are providing a consistent service across the province, both urban and rurally. This involves an investment in funding for foundational home visiting training through Great Kids Inc as well as tools such as ASQ-2 and ASQ-SE, Family violence screening protocol, Developmental Parenting, PICCOLO and HOVRS. By using tools that are evidence-based, reliable and valid we can ensure that we are grounded in effective best practices for home visitation. The goal is to start where we are at and build on the knowledge, skills and experience

that we have within our agencies to provide a similar experience for the families we see daily.

We are doing this within the new reality of the COVID-19 pandemic. Programs have adapted their services for families in a safe and healthy way. This has meant meeting virtually, by phone, in parks, backyards and garages. They have invested in personal protective equipment and many are meeting in family homes when everyone is healthy. Home visitation staff continue to be flexible and creative in how they work with families as they are hoping to change endings in positive and productive ways so families can succeed.

In this issue of *Connections*, we have asked our contributors to focus on hope and resiliency. In true form, agency staff have contributed wonderful examples of the work they are doing with families in our province—this is how we are changing the ending.

Lavonne Roloff is the provincial director of the Alberta Home Visitation Network Association (AHVNA).

## Facilitating Resilience in the Midst of Challenge

by Barbara Stroud, PhD

The unprecedented events of 2020 have resulted in sequential challenges to our physical health, emotional well-being and financial stability. At the individual, family and systems level, we are all learning to do our best with fewer resource. The often-overwhelming assault of stress to our nervous system has been unrelenting, resulting in a prolonged state of trauma for our brain and our body. While none of us are biologically or psychologically prepared for this level of persistent toxic stress, the youngest among us are at the greatest risk. Infants and young children require greater nurturance and emotional support from caregivers, making now the time to weave resilience into their developing neural patterns. This article will assist home visitors in understanding the simple, yet highly impactful relational skills they can adopt to support robust brain development.

Home visitors can be a useful facilitator of resilience for caregivers, children and family systems.

Remember that resilience is found in relationships, and relationships require our capacity to bring our best selves to the interaction. What does this mean for home visitors? Standing on a platform focused on relationships necessitates that home visitors

maintain a focus on their own emotional health, as a parallel process to supporting the emotional wellness of the caregiver and the family system. Emotional awareness facilitates stress management, so the first step for home visitors is maintaining a practice of self-compassion.

From an infant mental health perspective, we understand that relationships are dynamic, ever-changing systems; they are interactive and complex. When defining a list of interpersonal tasks to facilitate resilience, we understand such steps may not always move seamlessly through a linear pattern. Additionally, it must be underscored that we each bring and enact our cultural values within our relational way of being. What this means for all providers is the need for ongoing curiosity about the unique internalized and external expressions of culture the family demonstrates and transmits to their child. It is also important to remember that resilience is not a place but a process; not a skill set, but rather a result.



Let us begin by looking at four steps to building relationships that facilitate resilience: Safe, Seen, Heard and Helped. When home visitors and caregivers stand on these relational strategies of interaction, they create the elements of nurturance, emotional regulation and validation that facilitate ego development, emotional health and mental flexibility.

- 1. Safety always comes first. Safety in relationships facilitates trust. Infants require caregivers to protect them from harm in order to survive. When our brain is focused on survival, we are not focused on new growth. To move development and also the home visitor/caregiver relationship forward, safety and trust are the corner stones. Infants quickly learn the non-verbal cues of caregivers indicating when a novel event or person is safe or unsafe. This life skill of threat assessment is also a factor in resilience. To know when you are safe in relationship, safe in your environment, who you can trust and when to exit an unsafe relationship or environment are powerful life skills. Remember, these non-verbal intuitive processes are trained into the brain and facilitate relational health across the lifespan. When individuals can trust in themselves, those around them and their internal capacity to overcome obstacles, this becomes a tool for resilience.
- Do you see me? We all long to be seen as capable, lovable and worthy of acceptance. How we see our children often becomes how they see themselves. Do we see our children with potential and developing wisdom, or as demanding, selfish and undisciplined? Our children are using their behaviour to communicate their needs; for example, do we see the child's need for emotional regulation in a tantrum, or do we see a "problem child"? When the world does not see me as I am, and honour my experience as valuable, I learn to create a false self that pleases you, or to give up my attempts to gain your acceptance. To know myself as important to you, and to society, is a foundation for strong ego development. A strong sense of self gives a child or adult the confidence to step out into the world, take risks and experience new things. Remember, all learning requires risk. So for a child to become school ready, their ego development must be supported—allow your infant or young child to be seen by you, in all their complexity and possibilities.

### Every interaction is an opportunity to create positive change. Don't wait—do, from your heart and your head.

#### Can you not just hear but fully listen?

In order to facilitate resilience, children need to know they are worthy as individuals, believed for their felt experience and validated from their narrative of the event. Have you ever been dismissed or minimized for your experience? If so, how did you feel, and did that response motivate you to connect in relationship? Listening requires your undivided attention to the child's story. Listening is not telling the child your similar story, or how to fix their circumstance. Listening involves holding with, emotional mirroring of the experience and focusing on the perspective of the speaker. Remember, children may experience or remember events differently than we do. That does not make them wrong and us right. When listening from a developmental lens to move the speaker's emotional growth forward, it is important to understand that different people can hold different perspectives or truths, and that is acceptable. Learning is not teaching children to think like us, but to think like themselves. Relationships that listen to our world view, life experience or personal narrative without shame, blame or judgement fuel our ego development and demonstrate our interpersonal importance. As social creatures, we all long to be in connection, heard in our experience and validated in our truth. Hearing involves your ears; listening is from your heart.

#### Helping is not fixing but co-regulating. When we solve someone's problem for them, we rob them of an opportunity to build resilience. Co-regulation is the act of using your organized nervous system

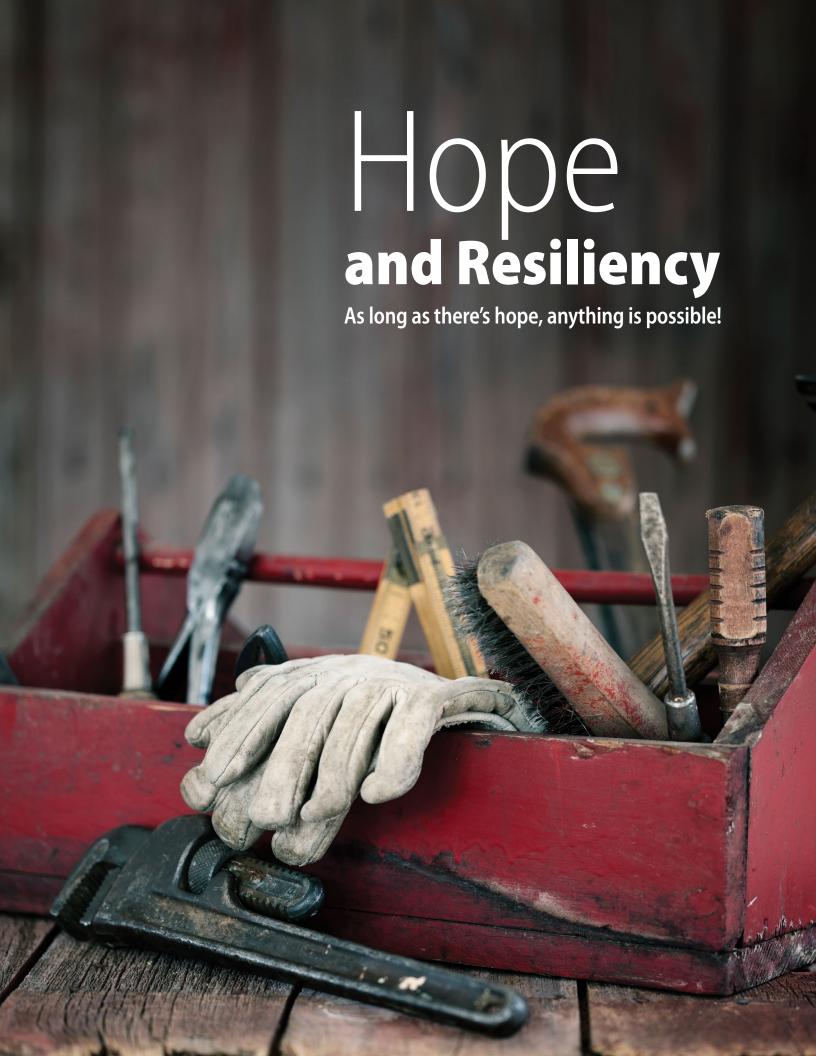
balanced capacity. Caregivers often learn to calm

Help from without and from within. to soothe or calm a disorganized brain (i.e., fear, anxiety, rage or despair) back to a place of calm or

or co-regulate their infants in the earliest months of life. Co-regulation, or emotional management, is necessary to be in relationship, to learn in the classroom, to be productive at work and much more. Self-soothing is a by-product of robust coregulation. Even as adults, there will be moments when life events feel overwhelming and out of our control. At such times, relationships of support serve as tools for co-regulation. Healthy emotional regulation skills are the key to managing intense feelings, maintaining relationship connection during moments of great stress and facilitating resilience. In our role as helpers, it is our goal to facilitate from without, as we build internal capacity from within.

What have we learned together? Your relationship with children and families has the capacity to build foundational neural patterns to facilitate resilience right now. Use the simple relational skills of creating safety, seeing the other in truth and beauty, hearing fully from your heart and helping by offering emotional understanding. Every interaction is an opportunity to create positive change. Don't wait-do, from your heart and your head. Families and children will experience the difference and gain from the experience of being with you.

Dr. Barbara Stroud, PhD is a psychologist, author, speaker and trainer who is "Changing the World – One Relationship at a Time." For more information, visit www.DrBarbaraStroud.com.



#### by Garth Lacombe

From a young age I always knew that I was going to be a good dad even though I wasn't sure I knew what that looked like...maybe it was just hoping I was going to be a good dad? I never gave it much thought but yet somehow, I knew it to be true. I always heard the saying, "Kids are so resilient," but never really knew what it meant. Was I resilient even though I didn't know the meaning? Resiliency is in all of us but until it's pointed out, we almost never realize it.

Through high school I worked at the local daycare because I enjoyed being around kids as if they were a direct link to my own child self. Is it because I wanted a do-over of my own childhood? I often wondered why I had no real passion in what I wanted to do with my life, yet opportunities were being presented to me by the universe and I had no idea. I had my own traumas, adversities and stress to deal with, but no tools on how to navigate through it all. I'd been given the opportunities to trust some really great men and fathers while growing up, yet all I ever focused on were the times I'd been let down by others, including my own father (it's hard to admit that). I have no memories of seeing my dad ask for any help or support, and if he did, I wasn't fortunate enough to witness it. An important survival skill I wouldn't learn until much later in life: ask for help, and be willing to receive it!

It wasn't until I was very close to failing in my second marriage that I reached out and was given the support I both needed and received. If I was going to fail, then I was going to do everything I could before that happened, even if that meant asking for help and learning how to receive it. Being too scared or proud didn't matter anymore.

Seven years later my marriage is amazing, I continue to ask for support, and yes, I'm usually willing to receive it. I've learned to embrace when others offer support because I know and accept that we can't do it all by ourselves. I've grown as a person, I'm the happiest I've ever been, and it's all because of the support system I have in my life. Even as I'm writing, I recognize how truly resilient I was to be able to get through it all. Not seeing myself as a victim to my circumstances, but rather owning my situation and reclaiming my power back was my

greatest challenge. Having a support system that helped me to acknowledge both my skills and gifts rather than my weaknesses was instrumental. This was the beginning of many healthy relationships I was building in my life. I realized that my passion was to support other men as they learn about and embrace the same tools and gifts that I was being given.

As a father I was only using the tools and experiences I remembered from my childhood, many of which were not always effective. I now know that there are other options available, and



I am not waiting around for them to magically appear. Through the guidance and support of some truly amazing people, I've learned that there are so many more effective ways to parent. Knowing my passion and having more effective parenting skills combined with an amazing opportunity arriving just then meant it was time to share what I'd learned.

For the last 18 months, I've been working as a male home visitor for a wonderful organization. Supporting fathers who are navigating through the challenges of being a father, and witnessing how

truly resilient they all are and the challenges they face on a daily basis, has allowed me to become more resilient, both personally and professionally. I continue to work at creating a healthy relationship with these dads so they feel safe enough to trust me, as well as learning how to accept my support. Since the COVID-19 pandemic began I have been tested in my personal life as well as my job as a home visitor. The fathers I work with are always looking out for me by offering their support (beautiful, right?). The best part of it all is the children who are there to witness two fathers asking for and offering support to each other. Today I can say that I am a good dad and I can also say I help other men discover the good dad in themselves and, together, our resilience is paying off.

The phrase I use almost daily is, "NOBODY GETS HOME ALONE." We all need support and someone who believes in us. ■

Garth Lacombe is the dads engagement/male home visitor in the Kikosewin Family Resource Network Hub at Bent Arrow Traditional Healing Society.



by Donna Kerr

Many home visiting programs include Motivational Interviewing (MI for short) as a core element of practice. MI is an evidence-based method with over 30 years of research. MI has changed over the years and continues to evolve as research results come in, because we're still learning how to better help people move towards change.

#### So what is MI?

Have you ever worked with a parent who doesn't see the need to change a parenting practice? Or a parent who says they need or want to change, but never act on it? These are two examples of motivational issues where MI can help. At its core, MI is a way of chatting with people that increases the likelihood of change.

#### How does it work?

MI works on two levels: the relational and the technical. The relational level emphasizes partnership and empathy. The technical level is how we work with the language of change to guide conversations towards change. We can't do one without the other; if we try to do only the technical part, it won't work. And a good working relationship does not necessarily lead to change—conversations can head down the "don't change" road even with good partnership and empathy.

#### **Ambivalence**

Ambivalence means feeling two ways about something. In the context of change, it often comes out as a "but"—"I know I should exercise more, but I don't have the time." In this "but" statement, there is a change side (I know I should exercise more) and

a don't change side (I don't have the time). MI works to resolve ambivalence in the direction of change.

The language of ambivalence has two main types of talk: change and don't change talk (technically don't change talk is called sustain talk, but I have found that term is confusing for people). Change talk is any language we hear that indicates movement towards change, and don't change talk is the exact opposite.

We have sub-types of change language: pre-action and action change talk. Pre-action language is about importance (reason, need, desire) or confidence (ability, hope). And ACTion language (activation, commitment and taking steps) indicates a move towards taking action.

The more change talk we hear in a conversation, the more likely change will happen. And the opposite is also true; the more don't change talk we hear, the less likely change will happen.

#### A roadmap

MI gives us a roadmap to help navigate through four main tasks in helping a person move towards change. These tasks are Engaging, Focusing, Evoking and Planning.

#### Engaging

A central task of MI is to establish and maintain engagement. It is the foundation everything else is built on. We continually monitor the quality of engagement in MI and if we see signs we're losing engagement, we change what we're doing.

#### Focusing

MI helps people move towards a change, so we need a goal or target behaviour. The goal must have a direction of change, either stop, start or modify. The direction is like our beacon, it's where we are moving towards. Everything we do in MI is in the service of helping people move in the direction of the change.

#### Evoking

The first two tasks are not unique to MI, but evoking is unique to MI. Evoking means drawing out and reinforcing change talk. The amount of change and don't change talk in a conversation is under the practitioner's influence. Everything we do in MI is designed to evoke and reinforce change talk and to reduce or soften don't change talk.

#### Planning

A key point in an interview is when to move from "Why" to "How." Only when there is enough importance and confidence can we successfully move to figuring out how to change, i.e., planning. One of the errors practitioners make is to move to planning too quickly, before the client is ready. When this happens, we decrease the odds of change happening.

MI gives us signs of shifting readiness that tell us it might be time to plan. We continue to evoke which means we draw out the plan from the person and work to strengthen commitment to the plan. Once a plan is in place and there is commitment to the plan, we transition out of MI and begin using more action-oriented strategies until the next time we need to evoke motivation for change.

Donna Kerr is a master trainer in Motivational Interviewing.

# Parent-focused vs. Parenting-focused: A Crucial Distinction

## How do we help parents nurture their children despite a crisis?

by Wenda Wen, BSW RSW

Attending the book club for *Developmental Parenting:* A Guide for Early Childhood Practitioners\* is a wonderful self-reflection journey for me. As a home visitor of over seven years, I admit that I've gotten stuck many times in helping parents solve their concrete problems, whether that be saving them from the crisis, delivering the designated nurturing parenting curriculums, or sometimes completing required paperwork. Often, I have conducted home visiting more like a crisis worker, a lecturer or a resource broker, especially when the parents were facing a crisis or other adversities.

I have attended many training events and workshops. However, there is little description or guidance for a home visitor on how to conduct home visits. What happens on home visits to effectively achieve the successful outcome of home visitation programs, which is supporting parents to foster a nurturing and healthy environment to meet their children's developmental needs? How *do* we help parents nurture their children's developmental needs and promote secure parent-child attachment?

Developmental Parenting enlightened me on switching my practice from a parent-focused model to a parenting-focused model. A parent-focused (or client-focused) model focuses on helping the parents with problem-solving, and providing emotional support and information about child development. This practice model can effectively help parents in crisis reduce acute stress, but it does not help parents facing various adversities make desirable changes to become engaged in developmental parenting. The authors point out that a parent-focused model sends an implicit message that the parents in crisis are inadequate to respond to their children's needs while facing personal or family problems.

I realized that using this model diminishes a home visitor's capacity to support parents facing hardships to nurture their children's development. Yes, home visitors must ensure the parents at risk connect with available community resources to meet their basic needs and reduce acute stress, but, "A child's development will not wait while the parent finds shelter, food and relief. If a traumatic situation interferes with parenting, then it is likely to be even more traumatic for a very young child" (p. 5).

When parents are in crisis, it becomes imperative that the parents can take time to respond to their children's needs and engage in meaningful parent-child interactions. Instead of working as a crisis worker, a home visitor can play a vital role in engaging, supporting and empowering traumatized or distressed parents to notice their children's daily developmental needs, and then respond to those needs. This is a wake-up call for me that has changed how I work with parents in crisis.

Developmental Parenting provides home visitors with a comprehensive and practical guide on how to use a parenting-focused parenting model to implement a facilitative home visiting approach that ensures home visitors and parents stay focused on children's developmental needs. A parenting-focused model emphasizes parent-child interactions, contributing to young children's social-emotional, cognitive and language development. In the book, the authors explain how to implement a facilitative approach on home visiting and how to guide home visitors and parents to stay focused on developmental parenting and parent-child interactions. They recommend two strategies to direct the home visiting process. The first is "Say what you see" in the interactions between a parent and child, and the second "What you do not see" regarding a child's typical behaviours, temperament, interest and the effect of adverse experiences on the child.

I put those two strategies to work during a recent home visit. When I listened to a mother with chronic depression disorder talking about her separation from a partner, I asked her how her 16-month boy was doing—did she notice any behavioural changes in her son? She told me that she noticed her son was agitated and could not sleep well during the night. Then we talked about the bedtime routine, such as bath time, bedtime stories and cuddle time. I encouraged the mother to take her son on a walk with me to the park and to jump on the fallen leaves. In my role as a home visitor, I was able to comment on her positive interactions with her son. This changed the home visit from having a crisis-driven focus to one where the parent was focused on her child.

\* Roggman, L.A., Boyce, L.K., & Innocenti M.S. (2008). *Developmental Parenting: A Guide for Early Childhood Practitioners*. Brookes Publishing.

Wenda Wen, BSW RSW is a home visitor with the Children's Cottage Society in Calgary.



## connections

#### **Coming up**

The next issue of Connections will continue our focus on hope and resiliency in home visitation/family support practice. If you would like to submit an article or resource for this topic, please send to info@ahvna.orq by January 15, 2021.

#### Hearing from you

Connections is published two times per year by the Alberta Home Visitation Network Association. We welcome comments, questions and feedback on this newsletter. Please direct any comments to Lavonne Roloff, AHVNA provincial director, by phone at 780.429.4787 or by email to info@ahvna.org.

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## A Happy Home Visit

by Aurelie Minka

It is October 8, 2020, and the weather forecast is 16 degrees. It is not June's hot temperatures anymore, but not December's cold winter either yet: somehow, all is good. I am going to visit with the Tagoa family, who recently welcomed an additional member to their household. Baby Christian was born on October 1 (names in this story are changed for confidentiality reasons). Babies like Christian are called "COVID-19 Babies" in our agency, referring to babies born during the pandemic.

Upon arrival, I park my car on the roadside in front of the house. As per the COVID-19 procedure, I sanitize my hands and put on gloves and my mask before leaving the car. Nina, a young girl, welcomes me at the door. I learn later that she is eight years old. At the entrance, I notice a table set up with much sanitizing equipment: gloves, hand sanitizer and disinfectant spray. Out of respect for the family and for safety reasons, I sanitize my hands once more, and then, using the action tool named "accentuate the positives" immediately after the greetings, I say, "You are in line with COVID- 19 protocol here in your house. It shows how much you value both your family and your visitors' safety."

Jeannette Tagao, the mother, looks at me proudly and replies, smiling, "I put it there because a lot of people are coming to greet my little Christian since we left the hospital. I want Christian to stay healthy." Impressed by Jeannette's response, I reply to her, "This is a brilliant demonstration of a loving mother-child relationship. Do you know this is the type of love that contributes to Christian's harmonious development? It builds a

nurturing attachment between Christian and you, while creating new neuron connections in his brain. These connections are linked to intelligence."

Jeannette picks up Christian from his crib and continues to chat with me, rocking the baby in her arms. Little Nina sits beside Jeannette, stroking Christian's hair: a perfect picture of family closeness and sharing good times. This is so wonderful that I can't help staring at her with admiration. After that, I present mom with the welcome baby kits offered to Christian by Institut Guy-Lacombe de la famille (IGLF), following the learnings received earlier in the day about "the parallel process." Our conversation continues, revolving around the

Christian soon begins to cry. "Do you know what Christian wants when he begins to cry this way?" I ask his mom. Jeannette tells me, "Christian is hungry; it is his milk time." Immediately, she begins breastfeeding the baby unselfconsciously without covering herself (in most African cultures women do not cover their breast when feeding their baby as breastfeeding is not connected with sex) while Nina unwraps the kit. Nina removes a children's story from the bag and reads it to Christian.

Seizing the opportunity, I grab a brochure from the kit entitled, "10 Good Reasons to Breastfeed" and present it to Jeannette as she feeds Christian. I explain the benefits of breastfeeding saying, "Research shows that breast milk is the ideal nutrition for babies; it contains important antibodies and reduces disease risk." After staying for an hour and a half with the family, all the while commenting on and observing the joyful bonding relationships between Jeannette and her two children, it's time for me to go. I leave feeling happy and uplifted, knowing that Nina and Christian are safe in Jeannette's good care.

Aurelie Minka is a home visitor with Institut Guy-Lacombe de la famille (IGLF). This is the Francophone Family Resource Network Hub in Edmonton.