

The Engagement Phase

Parent Begins the Activity

Once the activity is chosen and set up, then parent should be invited to begin the activity with their child. As the interventionist, **you will observe the parent-child interaction for at least 30 seconds before providing input.**

It may feel odd to have parents act first and to wait 30 seconds before interjecting. While interventionists often model practice before having parents attempt the activity, this communicates that the interventionist is the expert and the model is the right way to accomplish the task. When parents are invited to join, they may feel that success is completing the activity as the interventionist modeled. However, most activities can be accomplished in a variety of ways. Therefore, having parents attempt the activity first allows them to take the leadership role with their child. Secondly, by observing for 30 seconds, parents are given a brief opportunity to problem-solve through immediate issues that they encounter. As you observe you can find numerous ways to affirm what the parent is doing and thereby building parent competence.



Parent facing child. As parents work directly with their child, it is important that parents face their child. Research suggests that when parents sit children in their lap and interact from behind the child, the parents become directive and the child becomes passive. This is not desired. We want children with visual impairments to actively explore their world and engage with the environment. Active exploration promotes learning. Therefore, parents should be encouraged to face their child as they interact.

Professional Support

Using triadic strategies. As the activity continues, **you can support the parent** using strategies that encourage and promote the parent-child relationship. Triadic strategies that will be described in this module include:

- affirming parent competence,
- focusing attention,
- providing developmental information,
- providing suggestions, and
- modeling.

For the most part, parents will be working directly with their child while you work to assist and sustain this interaction.

Affirming parent competence. Affirming parent competence is when you articulate strategies that you notice parents using to meet goals. You might mention a specific strategy because it is unique, works particularly well, or because the parent is using it well. Such affirmation builds parents confidence in working with their child. For example, you might observe the parent hold the bowl while talking their child through scooping with a

spoon. If this is successful, you can point out that the way the parent waited while the child figured out how to scoop was a successful approach and encourage the parent to continue to continue. Showing the parent that what they are doing is working and also supporting the child's skill development will build the parents confidence while encouraging them to continue to use the strategy.

Focus attention and providing developmental information. Focusing attention is when you point out what the child is doing. For example, you might note that the child stills when the garbage truck goes by the house. You could point out that the baby stills because he is listening to the sounds. And you might suggest that this is an opportunity for the parent to provide information about the sound to help the child give it meaning. Providing developmental information goes a step further offering parents information about the child's skills and next steps.

Providing suggestions and modeling. It is helpful to provide suggestions as you observe a parent working with their child. For example, if a parent is working on teaching their child to use a spoon, you might suggest that they hold the bowl, preload the spoon, or give a verbal prompt. Such suggestions allow the parent to maintain engagement directly with their child, while receiving support on accomplishing the goal. When suggestions are not working to promote success, you might need to model. However, as mentioned at the beginning of this module, modeling puts you, the interventionist, in an expert position and communicates that your way is the right way to accomplish a task. This can diminish parent competence. Modeling should be used with caution. However, sometimes it becomes necessary.

Teaching specialized skills. During the Engagement phase, you also have the opportunity to teach the parents techniques that are specialized when a child has a visual impairment. Such skills are essential for building parent competence and considered essential when a child has a visual impairment. By teaching parents these skills as they work directly with their child, you allow them to practice the skill and experience success. This will increase the likelihood that parents will follow through with the strategy beyond the intervention session.

These techniques that lead to development of specialized skills are those that you have learned through your training in visual impairments and your experience with the population. It is important that you clearly affirm parents when they implement such skills and highlight the child's response. You might also suggest adjustments to the way the parents are approaching an interaction and even model specific techniques if necessary.

A very short sample list of techniques is provided below. Many more could be listed:

- hand-under-hand
- hand-over-hand
- backward chaining
- recognizing and responding to the infants subtle communicative cues
- tactual development for Braille readiness
- providing verbal cues
- providing verbal descriptions
- providing time for independent sensory exploration