Family Involvement DEFINITION



- Parents and family/caregivers' involvement as active team members alongside various service providers
- Entails family taking a coordinator or facilitator role in their child's health and development

This principle is one of the 10 evidence-based principles, identified in a scoping review, that can guide the organization and delivery of services for students with disabilities in integrated classrooms.













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References:

- Bagnato, S. J., Blair, K., Slater, J., McNally, R., Mathews, J., & Minzenberg, B. (2004). Developmental healthcare partnerships in inclusive early childhood intervention settings: the HealthyCHILD model. *Infants & Young Children: An Interdisciplinary Journal of Early Childhood Intervention*, 17(4), 301-317.
- Gioia, G. A. (2014). Medical-School Partnership in Guiding Return to School Following Mild Traumatic Brain Injury in Youth. *Journal Of Child Neurology*, 31(1), 93-108.
- Model for Creating a Supportive Trauma-Informed Culture for Children in Preschool Settings. *Journal Of Child And Family Studies*, 24(6), 1650-1659.
- Koskie, J., & Freeze, R. (2000). A critique of multidisciplinary teaming: Problems and possibilities. *Developmental Disabilities Bulletin, 28*(1), 1-17.
- Reynolds, A. J., Magnuson, K. A., & Ou, S.-R. (2010). Preschool-to-third grade programs and practices: A review of research. *Children and Youth Services Review, 32*(8), 1121-1131. doi:10.1016/j.childyouth.2009.10.017
- Strain, P. S., Wilson, K., & Dunlap, G. (2011). Prevent-Teach-Reinforce: Addressing Problem Behaviors of Students with Autism in General Education Classrooms. *Behavioral Disorders*, *36*(3), 160-171.

Principle 4: Family Involvement

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EXAMPLES

HealthyCHILD model: Working with parents as integral members of the team and as central collaborators to provide at-home services for the children with developmental delays, chronic conditions or challenging behaviours (Bagnato et al., 2004)

Head Smart Trauma Start: Mentoring parents of children who experience trauma in disadvantaged areas to create a trauma-informed culture in the pre-school setting and to promote family involvement in child's development (Holmes et al., 2015)

LEAP preschool model: Extensive skills training for family members of preschool children with autism to facilitate parents' management and involvement in child's behaviours (Strain et al., 2011)

Transdisciplinary approach:
Allowing the needs of the child and family to dictate the team's goals and having parents take case-manager roles to facilitate educational programs of students with complex disabilities (Koskie & Freeze, 2000)



Evidence & OUTCOME

In collaboration with other principles, involving families:

- Improved students' attention and behaviour as rated by teachers and parents; as well as promoted positive classroom relationships as perceived by parents (Holmes et al., 2015)
- Was associated with a significant improvement on measures of cognitive, language, social, and problem behavior, and autism symptoms among pre-schoolers (Strain et al., 2011)
- Through ongoing communication between parents and the health and school systems facilitated return to school for students following a traumatic brain injury (Gioia, 2014)
- Through intensive family support to parents of pre-school to third grade students is recommended to support successful transition for students in disadvantaged areas (Reynolds et al., 2009)

Application

IDEAS

- Empowering parents through skills training and information sessions
- Encouraging parents to take an active role in decision-making
 - Family overseeing service provision and providing feedback to teachers or other professionals working with student
 - Parents/caregivers taking part in team meetings and consulting and discussing intervention plans with teachers and professionals