

Families as Faculty

Host Family 101 Handbook

University of New Mexico

UNM-Farmington

Western New Mexico University

WNMU-Graduate Studies Center Gallup

New Mexico State University

Eastern New Mexico University

Central New Mexico Community College



Parents Reaching Out
Your One Stop Resource for a Stronger Family

Let us put our minds together
and see what
life we can make
for our children.

Chief Sitting Bull



Parents Reaching Out is funded through grants from the U.S. Department of Education, Office of Special Education Programs as the Parent Training and Information Center for New Mexico in addition to the federal Maternal and Child Health Bureau as the New Mexico Family to Family Health Information Center. The contents of this handbook were developed under the grant. However, the contents do not necessarily represent the policy of the US Department of Education, and you should not assume endorsement by the Federal Government.

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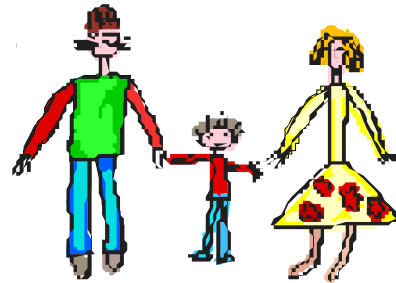
Welcome to Families as Faculty!

The materials in this handbook will provide you with information about Families as Faculty. We have included tips for hosting students in addition to publications and resources available from Parents Reaching Out. We hope that these materials will help you prepare for your student visit.

We want to say “*thank you*” many times over to the more than 170 host families in communities throughout New Mexico who are critical in making this experience a memorable and often transformational learning experience for students. We are also pleased to have so many supportive and enthusiastic colleagues around the state who have helped Families as Faculty to grow and continually evolve and deepen.

We look forward to working with you in your important role as a Host Family.

Families as Faculty Staff



Families as Faculty Goals

Participation in Families as Faculty has opened my eyes in ways that no amount of classroom lecture or library research ever could. I was allowed to experience, rather than discuss, real life issues with a family from my own community. Student

Goal One

To give students an opportunity to see a child beyond his or her illness or diagnosis and as a member of a family and community

It is wonderful to see them first and foremost as a family, instead of as patients. I will always remember that my patients are more than their disease, they are individual people. Student

Goal Two

To help students recognize and acknowledge their own values, attitudes and personal beliefs while still respecting the perspective of the family

I have come to understand that the way we respond to people who are different in any way, clearly reflects our own willingness to either expand our horizons, or to shrink back in fear. The manner in which we interface with people with apparent disabilities is far more reflective of our own personal capacities than those of the person we interface with. Student

Goal Three

To provide students an opportunity to view families as knowledgeable partners from whom they can learn

We need to move past the politics and realize that it is very important to not only pay close attention to all children, but also to the parents because they know the child better than we will every get to know him or her in the one year we may spend with that child. Student

Goal Four

To provide students an opportunity to explore the complex needs and strengths of families coping with a chronic condition or disability

I was humbled by their positive approach. I have heard people wonder if they would have the strength to raise a disabled child. After spending time with (Connie's) family, I am more convinced than ever that we all have the strength, what we may be lacking is an open mind. Student

Thank you again for opening your home to students!

As a Host Family for Families as Faculty, you will have the opportunity to share your story with students who are preparing to be teachers, doctors, nurses or occupational therapists. These informal visits are a chance to talk about your experiences with the education or medical system – what works, what doesn't. You will be able to share what you would like or need from a teacher or doctor. Here, families are the teachers and experts.

Visits last about two hours. You are free to set the time, place and what you will do together with students. It might be an informal meeting in the living room, a family dinner, or playtime in the park. Host families complete an evaluation of the visit and provide feedback to students.

If you have any questions about the visit or if a student does not call you within ONE week, please contact Parents Reaching Out (1-800-524-5176) and ask to speak to the Lead Liaison for Families as Faculty.

Tips to Prepare for the Visit

- Think about what will work for your family. Feel free to tell the student what times and dates are most convenient.
- Give the students an idea of what you will be doing together such as sharing a meal, attending a therapy session, or just visiting at home.
- If you host more than once a semester, try to approach each visit as fresh and unique. There may be some new information about your child to or an experience that will change what you say or do with students.
- Identify two or three points that you would absolutely want to be sure to share with the students. Think about how you will communicate them to the student(s). We encourage you to share both positive and negative experiences with students.
- Decide whether and how you will talk about your child's diagnoses with the student(s) and if you would like to have your child present during the visit.

During the Visit

- Try to avoid making generalizations, such as "Teachers never listen to us."
- If you have a negative experience to share, try to tell what the teacher or professional could have done to be more effective or helpful. Please keep the names and schools **involved anonymous**.

After the Visit

- Take a few moments to think about the visit before you complete the student evaluation. Fill in the students' name while they are still fresh in your mind. Please be as forthcoming as possible. Your responses are also shared with the university faculty and will help them and us continue to improve Families as Faculty.
- Please complete and return all forms as soon as possible after your visit. You will be provided with all required forms and an addressed, stamped envelope. WE CANNOT process your stipend until all paperwork is completed and received in our office.
- Please take time to write "Just a Note", students really enjoy your comments.

The Power of Story Telling

Their story, yours, mine – it's what we all carry with us on this trip we take, and we owe it to each other to respect our stories and learn from them.

Everyone has a story to tell. Our stories reveal how we think about ourselves, how we define and give meaning to our experiences and how information is selectively passed on from one generation to the next. Our stories are shaped by what we pay attention to. And what we pay attention to is influenced by gender, age, culture, family history, values and expectations for the future.



The Families as Faculty experience is based on the central principle of story telling, a language common to families everywhere. By inviting students into your homes and communities, you have the opportunity to teach the kinds of lessons that can't be learned in school or at a therapy session. There, the emphasis is on the diagnosis or problem. In the home and community, the emphasis is on living life to the fullest.

Some things to talk about during your Host Family visit with students:

1. What would the perfect program for your child look like?
2. What is a typical day for you and your family?
3. What are your other children's thoughts and feelings about growing up with a family member who has a disability?
4. What would you like a teacher to know about your child? Your family?
5. What are your dreams for your child?
6. What are some of your child's special abilities or interests? Challenges?
7. Describe how a teacher could best support you and your child.
8. What has been the best thing someone has done to support your child?
9. What is one thing that you would like future educators to know?
10. What have been some of your challenges with the educational system? What have been some of your successes? What made them so?

Family-Centered Care: Questions and Answers¹

What is family-centered health care?

Family-centered care is an approach to the planning, delivery, and evaluation of health care that is governed by mutual beneficial partnerships between health care providers, patients, and families. Family-centered applies to patients of all ages, and it may be practiced in any health care setting.

What are the principals of family-centered care?

Family-centered care is characterized by four principals:

1. People are treated with dignity and respect.
2. Health care providers communicate and share complete and unbiased information with patients and families in ways that are affirming and useful.
3. Patients and family members build on their strengths by participating in experiences that enhance control and independence.
4. Collaboration among patients, family members, and providers occurs in policy and program development and professional education, as well as in the delivery of care.

What is meant by the word “family”?

The word “family” refers to two or more persons who are related in any way-biologically, emotionally, or legally.

How is “family” defined for an individual patient?

The definition of family, as well as the degree of family involvement in health care, is controlled by the patient, provided he or she is developmentally mature and competent to do so. In pediatrics, families define for themselves who their family members are. The term “family-centered” is in no way intended to remove control from adults who are competent to make decisions concerning their own health care. The term “patient-and family-centered” may be used outside of the pediatric setting in order to make this explicit.

Is there a difference between family-centered care and family-focused care?

Both approaches acknowledge involvement with the family as a fundamental element of care. In family-focused care, professionals may provide care from the position of an “expert”; they tell the family what to do. They do things to and for the patient and family and consider the family the “unit of intervention.”

Family-centered care, by contrast, is characterized by a collaborative approach to caregivers and decision-making. Each party respects the knowledge, skills, and experience the other brings to the health care encounter.

Does family-centered care have anything to do with family practice?

Family practice is a medical specialty. Although the principles of family-centered care are particularly suited to the practice of family medicine, they transcend medical specialty.

¹ Family Centered Care: Questions and Answers, The Institute for Family-Centered Care, www.familycenteredcare.org

Six Principles of IDEA

Free Appropriate Public Education (FAPE): IDEA requires that agencies provide special education and related services at no cost to the parent. It requires that an Individualized Education Program (IEP) be developed for each child with a disability. The IEP is based on the child's needs and specifies the child's present levels of educational performance (PLEP), program goals, objectives or benchmarks and specific services to be delivered to the child.

Appropriate Evaluation: Evaluation is a process, which involves obtaining and compiling as much information as possible from a variety of sources. These sources include: parent and teacher information, classroom observation and a formal assessment of your child's educational abilities. The objective of evaluation is to provide a picture of your child that can be used to determine what programs, supports, services, modifications and accommodations are needed. *Always remember:* no single person, no single test makes the decision for your child. All decisions are team decisions.

Individualized Education Program (IEP): The IEP is both a *meeting* at which parents and school personnel jointly make decisions about an educational program and a *document* that serves as a written record of the issues discussed and the decisions reached at these meetings. The IEP meeting serves as a communication vehicle between parents and school personnel. It enables them, as equal participants, to decide jointly what the student needs, to determine what services will be provided to meet those needs, and to anticipate the outcomes for success. An IEP is a *work in progress*, a product in need of constant revision. It is created, implemented, monitored, assessed, and modified until students have reached all of their goals. *Creating IEPs is an art, not a science.*

Least Restrictive Environment (LRE): LRE is the presumption that children with disabilities are most appropriately educated with their non-disabled peers. LRE means that special classes, separate schooling or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability of a child is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

Parent and Student Participation in Decision Making: IDEA, from its earliest days has required schools to involve each child's parents in developing the child's IEP. Parents must be notified, parents must give consent, and parent input must be solicited and considered. Parents must be given the opportunity to participate in all meetings concerning their child. Parents must be allowed to make informed decisions, which means that they understand all decisions and options as well as why proposals that were made were accepted or rejected.

Procedural Safeguards: Procedural safeguards are the guidelines that schools are required to follow. Schools are required to give parents a statement of parental rights and safeguards at various times and at any time parents request a copy. Safeguards are in place to ensure: 1) that the rights of children with disabilities and their parents are protected, 2) that students with disabilities and their parents are provided with the information they need to make decisions about the provision of FAPE, and 3) that procedures and mechanisms are in place to resolve disagreements between parties.

Relationships and Communication

The keys to your child's success in school are in your hands. These keys include knowing the educators in your child's life, talking with them, and establishing good communication and a friendly relationship with them. These keys will open many doors. They'll help you to work together and problem solve as a team, to trust and rely on one another, and to ensure that your child is supported and receives the services and instruction that will enable her/him to succeed.



The amount of time and energy you put into creating good relationships will pay off. Good relationships will limit the need for a more adversarial, and less desirable, relationship with your child's school. They promote cooperation and useful alliances.

Since building and maintaining relationships is hard work, we as families and educators have a tendency to wait until we see a problem before communicating with each other. However, we must all learn to communicate and partner effectively before the situation becomes difficult. We all need to build relationships long before there are problems. The first day of school is a good time to begin. Parents, who have relationships with the educators in their children's lives before problems arise, are more likely to resolve problems smoothly, quickly and effectively.

There are many ways for parents to establish relationships and be involved in their child's school and education: participate in the classroom; join local parent organizations; attend school board meetings; join school committees such as budget, IDEA, or policy committee, etc. Being involved tells your children that you believe that their education is important. You will also be sending a message to the school that says; "I care."

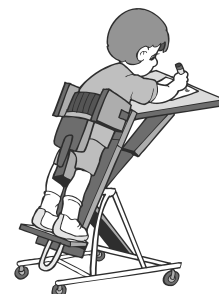
It should be noted that the drop out rate for students with disabilities is higher than the rate for students who are not disabled. Research indicates that when parents are involved in their child's school and in their education this number is greatly reduced and students achieve more. This happens regardless of socio-economic status, ethnic/racial background or the parent's educational level. Research has shown that everyone benefits when parents are involved in their child's education. Children achieve higher grades, test score and increased long-term academic success. Schools develop more successful programs and become more effective. Good relationships help to avoid problems, build successful programming, and support our children's achievements.

A relationship is about trust. In order to begin to trust we have to get to know one another. In order to get to know one another, we have to communicate, to talk and to listen. We at Parents Reaching Out believe in forming good relationships. We encourage families to take the extra time and go the extra mile to build a solid relationship with the educators in your child's life. The relationships we will focus on are the very important ones we form with the professionals and providers who deal with our children and us. A good relationship can ensure that fewer misunderstandings occur, that we are all on the same page. We work together as a team.

Relationships are two-way. They can benefit families as well as schools. We, as parents and families are the true experts on our children. Knowing the people in our children's educational environments will make us more influential and respected members of the teams that make decisions about our children's education (IEP teams for example) and more effective advocates for our children.

New Mexico's Best Practice Indicators for Least Restrictive Environment

- School staff is aware that when determining placement for a student with a disability, the general classroom is the setting first considered.
- School staff is aware that supplementary aids, supports, and services are linked to the LRE provision.
- School staff is aware that the LRE provision must be adhered to for all students regardless of severity of disability.
- The school develops curriculum, which provide opportunities for all students to learn about and appreciate individual differences among people.
- General and special education personnel have received training in collaborative teaming and creative problem-solving strategies.
- There is adequate planning time for general and special education teachers and other staff to collaborate.
- Families, educators, related service personnel, and students collaborate to write IEP goals and objectives.
- Students with various disabilities (e.g., those with mild, moderate, severe, hearing, emotional, and visual impairments) are members of their age-appropriate general education home school classrooms.
- The supports, aids, and services (e.g., modifications and other instructional methods) required for students with disabilities to be successful in the general education setting are implemented and updated as needed.
- Teams collaborate to: develop peer networks, adapt learning objectives, develop differentiated lessons/assessments, and make materials and environmental adaptations.
- Family input regarding their child's strengths as well as ideas for effective adaptations and accommodations are solicited and considered.
- The principal ensures that professional development is provided for their staff that includes a focus on LRE legal requirements, roles, responsibilities, and best practices.
- The site-based LRE Best Practice Plan addresses ways to:
 - a. Build consensus for a **vision** of educating all students in shared environments/experiences,
 - b. Provide school staff with the necessary **skills**,
 - c. Provide **incentives** to support system and classroom change (e.g., time to meet, training, opportunities to provide or receive mentoring),
 - d. Allocate the **resources** necessary to meet LRE mandates.





Inclusion

Children that learn together, learn to live together.

Children with Special Needs	General Education Students	Teachers	Society
affords a sense of belonging to the human family	provides opportunities to experience diversity on a classroom scale	helps appreciate the diversity of the human family	promotes the civil rights of all individuals
provides stimulating environment in which to grow and learn	develops an appreciation that everyone has unique characteristics and abilities	helps recognize that all students have strengths	teaches socialization and collaborative skills
evolves feelings of being a member of a community	develops respect for those with diverse characteristics	creates an awareness of the importance of direct individualized instruction	builds supportiveness and interdependence
enables the chance to develop friendships	develops sensitivity toward others' limitations	increases ways to creatively address challenges	provides children with a model of democratic principles
provides opportunities to develop neighborhood friends	develops feelings of empowerment and the ability to make a difference	supports collaborative problems solving skills	
provides affirmation of individuality	increases abilities to help and teach classmates	affords opportunity to face the challenges of participating on a multi-disciplinary team	
provides peer models provides opportunities to be educated with same age peers	develops empathetic skills	enhances accountability	

Sample Parent Report

*Keep your parent
report positive.*

Child's Name: James Patterson Grade: 4th

1. Share your child's strengths or positive points:
 - James is good at kicking the soccer ball.
 - James is very curious.
 - James is good with science facts.
2. Share any concerns you have about your child, such as:
 - Clothing (labels, only will wear one type of clothing, etc.)
 - Food (will only eat certain types of food or eats paper, etc.)
 - Light (sunlight hurts her/his eyes; fluorescent lights cause problems, etc.)
 - Noise (sounds bother him/her more than yourself, etc.)
 - Space (is afraid of large crowds or open spaces, etc.)
 - Sleeping (sleeps a lot or too little)
 - Other concerns:
3. What does your child like to do at home? What does your child dislike to do the most?
 - James likes to play computer and video games.
 - He likes to set up military scenes and play them out in his mind.
 - He does not like to do chores outside.
 - James gets angry when I ask him change activities.
4. Does your child play with other children? (at home, neighborhood, other places)
 - James will sometimes allow children to play next to him. I think he wants to play with other children but does not appear to know how to play with other children.
5. Share your hopes, dreams and goals for your child as an adult (employment, independent living, further education, etc.):
 - We hope James can find meaningful employment in the computer field.
 - Our hope is for James to have a few close and supportive friends.
 - Our dreams are for James to be able to find a suitable living arrangement.
6. What kind of positive reinforcement (and rewards) does your family find works at home?
 - At the end of the week, if James has finished his daily chores he earns a pizza. James loves pizza!
 - When James has completed his homework satisfactorily for the week, he is given the option of renting a video game or movie.



Contact Parents Reaching Out if you would like a blank form to complete for your own child.

Note: Host Families complete this evaluation on students and return it after the Family Visit. A copy is shared with the instructor and the original is kept at Parents Reaching Out.



Families as Faculty
Education
Student Evaluation

Please return by _____

Please be as forthcoming as possible. Your responses are also shared with the university faculty to provide feedback to them and to help us improve Families as Faculty. Thank you!

Name _____ Visit Date _____ Number Family Members Present _____

Student A _____ Student B _____

Would you like to be contacted about this visit? ___ Yes Best time to call: _____

Please answer the questions below for each student using a scale of 1 to 4. Place an x in the appropriate box to indicate your answer.	Student A				Student B			
	1	2	3	4	1	2	3	4
1. Did the student show an awareness of the purpose of the visit?								
2. Did the student have an open attitude to listen and learn from you and your family?								
3. Did the student contact you in a timely and courteous way to arrange or confirm the visit?								
4. Based on this visit, does the student have the potential to be a teacher with whom you would feel comfortable? Please feel free to comment in the space at the bottom of the page.								
5. Do you think the student gained an understanding of the goals of the program as a result of this visit?								
6. A. Was your child present for any or all of the visit? <input type="checkbox"/> YES <input type="checkbox"/> NO If your child was present, please answer B. B. Briefly describe how each student interacted with your child during the visit.								
7. Where did you and the students meet?								

8. Please check one or more of the principles of family- centered care that you talked about with the students.

respect strengths information choice
 support flexibility collaboration empowerment

Other comments.

Resources from Parents Reaching Out

The follow publications are available in hard copy and on CD. If you would like a copy of our materials, please feel free to visit our office or contact our Resource Center at 505-247-0192 or 1-800-524-5176 to place a request. Visit our web site: www.parentsreachingout.org to download these materials and other information.

* Indicates Spanish version is available

Acronyms, Abbreviations and Definitions

A Bridge to the Future * (Ability Pathway to Diploma)

Book of Ideas * (Learning Styles, Instructional Strategies and more)

Did You Know Fact Sheets * (NCLB, Literacy, Parent Involvement, Early Childhood)

Early Intervention and Natural Environments * (Birth to three)

Extended School Year * (Special Education Related Service)

Family Health Care Tips* (Fact Sheets on Health Care Access)

Family Connections Series* (6 books based on the Epstein Model for Quality Schools)

Family Involvement: Building Community Partnerships* (Schools & Systems Change)

First Steps Fact Sheets* (Early Intervention)

How Can I Help This Child? (Sensory Integration)

Let's Begin the Journey * (Overview of Special Education)

Mission Transition * (Head Start to Elementary)

Next Steps to Success * (Early Intervention to Early Childhood)

Open Line and More * (Communication Skills)

Positive Directions for Student Behavior (Intervention Strategies & Tools)

Practical Inclusive Education in New Mexico * (Differentiated learning at its best)

Telling Your Story * (Communication Skills—Sharing Your Perspective)

The Journey Continues* (Standard and Career Readiness Paths to Diploma)

The Handbook: Parental Rights and Special Education Procedures * (IEP Process)

We also distribute New Mexico Public Education Department-Technical Assistance Documents: Pathways to the Diploma; SAT- Student Assistance Team and the Three-Tiered Model of Student Intervention; and Gifted Education and publications from other stage and national agencies.

Parents Reaching Out

Your One Stop Resource for a Stronger Family

As a statewide non-profit organization, we connect with parents, caregivers, educators and other professionals to promote healthy, positive and caring experiences for New Mexico families and children. We have served New Mexico families for over twenty five years. Our staff and Family Leadership Action Network volunteers reflect the unique diversity of the communities throughout our state.

Children do not come with instructions on how to deal with the difficult circumstances that many families experience. Parents Reaching Out believes that families' needs go beyond the bounds of formal services. *What we can offer to each other is uniquely ours. We have all been there.*

Our Mission

The mission of Parents Reaching Out is to enhance positive outcomes for families and children in New Mexico through informed decision making, advocacy, education, and resources. Parents Reaching Out provides the networking opportunities for families to connect with and support each other. This mission supports *all families* including those who have children with disabilities, and others who are disenfranchised. Parents Reaching Out achieves this by:

- ♦ Developing family leadership
- ♦ Connecting families to each other
- ♦ Building collaborative partnerships
- ♦ Providing families knowledge and tools to enhance their power

Our Beliefs

- ♦ Families need support where ever they are in their journey.
- ♦ All families care deeply about their children.
- ♦ Families may need tools and support to accomplish their dreams.
- ♦ All families are capable of making informed decisions that are right for their family.
- ♦ Families in the state benefit from our organization having the staff and materials that meet their diversity.
- ♦ Systems that listen carefully to the family perspective improve outcomes for our children.

We invite all families and those serving families and children in New Mexico to make *Parents Reaching Out your one stop resource for a stronger family.* Our publications, workshops, and Resource Center offer tools for informed decision-making and building partnerships in communities. Our trained staff and network of volunteers are here to serve you.

Parents Reaching Out is the home of:

NM Parent Information and Resource Center (NMPIRC)
NM Parent Training and Information Center (NMPTIC)
NM Family to Family Health Information Center (NMF2FHIC)

Parents Reaching Out

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www.parentsreachingout.org

From I-25—take the Gibson Blvd Exit 222 and go East on Gibson. Turn left at the third stop light (Girard). Turn left on Vail. Go one block to Columbia. Turn left on Columbia. Parents Reaching Out is on the east side of the street. Welcome!

