



## Operationalizing Capacity-Building Family Support

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### ABSTRACT

This *CASEinPoint* describes a framework for implementing capacity-building practices when helping parents achieve their family support and well-being outcomes. Coaching and natural learning environment practices have become a mainstay of early intervention for promoting child participation and learning; however, coaching with regard to service coordination, resource coordination, and other family support and well-being contexts remains a challenge. Little has been written within the last two decades about how capacity-building caregiver coaching is applied to instances where families request help with their own resource priorities. Service coordination tasks such as helping families find a medical provider, secure reliable transportation, ensure having enough food and formula, or increase employability can be carried out in a capacity-building manner with the use of an evidence-based coaching interaction style. This *CASEinPoint* discusses how to apply caregiver coaching to service coordination activities to promote family well-being.

### INTRODUCTION

Practitioners from across help-giving fields work hard to provide services and support to families based on their needs. Research and experience tell us that not all families benefit from this support, and sadly, some experience a decline in family functioning and well-being despite the support. Fortunately, frameworks exist for help-givers to consider family strengths and circumstances when supporting caregivers to improve their capacities for meeting self-identified priorities. Although decades of research (Bruder, 2010; Campbell & Halbert, 2002; Dunst et al., 1994; Rush & Shelden, 2020) advocate for the use of specific practices (e.g., resource-based intervention practices) and styles of interaction (i.e., coaching) endorsed by national professional organizations because they promote long-term family well-being, a surprisingly low number of early intervention professionals and agencies use the practices with regularity or fidelity (see Campbell & Halbert, 2002; Campbell & Sawyer, 2009; Childress et al., 2013). This *CASEinPoint* provides an overview of how to use resource-based practices and a capacity-building coaching interaction style to promote family well-being.

## THE ROAD OF FAMILY SUPPORT IS PAVED WITH GOOD INTENTIONS

Family support practitioners such as service coordinators, social workers, and family advocates work to provide assistance to large numbers of families with varied needs and priorities and do so within the confines of program policies, state mandates, and federal regulations. Early intervention service coordinators, for example, may provide assistance to 50 or more families while monitoring the provision of services by a team of providers, coordinating strict timelines, and adhering to state policies and the federal guidelines of the Individuals with Disabilities Education Act (IDEA), Part C. Head Start family support workers may provide support to more than 75 families on an annual basis. The array of challenges families can experience range from joblessness, homelessness, food insecurity, and high levels of toxic stress. Families can be impacted by their child's diagnosis or condition and the resulting medical appointments, equipment needs, and paperwork required to access community and state resources. Any of these topics could become the focus of a family well-being goal addressed by help-givers.

Help-giving supports are intended to strengthen family well-being by addressing immediate priorities and building the capacity of families to minimize the negative impact of stressors in the future. Help-givers often implement strategies that have been handed down through office culture or that align with the practitioner's values, beliefs, or common sense. Among the most popular strategies is the practice of responding to a request for help or presumed need for help with a list of resources, advice, or instructions. Many times, help-givers go out of their way to investigate resources they believe will be helpful to families, saving families the time and energy of doing it themselves. Unfortunately, this type of assistance, although well-intended, is not helpful in supporting families' long-term abilities to strengthen their own well-being (Affleck et al., 1989; Bandura & Locke, 2003; Dunst et al., 1994, 2007). Help-givers often find that families do not act on the information or it did not produce the short- or long-term effects intended by the help-giver. Information and advice, even when followed, merely provide a quick and temporary fix, but does not address the underlying barriers that constrain families from resolving their issues or acting on their priorities. Help-givers must provide opportunities for active skill-building and reflection to

assist families in developing skills for overcoming barriers as they arise (Bransford et al., 2000).

## GOOD INTENTIONS ARE NOT ENOUGH

The common practice of providing individuals and families with lists of resources or contacting resources on behalf of families is often not helpful to the family's long-term well-being. In fact, the way in which help-givers provide the needed resources can lead the family to believe the professional's role in mobilizing resources is more important than the family's role, and may lead to dependency, resulting in a negative or even harmful consequence for the family (Brickman et al., 1982). The child's family members miss the opportunity to learn about their own abilities and may fail to attribute personal skills and assets as beneficial tools in meeting outcomes. The help-giving literature has informed the field for decades that providing families with concrete support and resources when they are in need may seem expedient, but doing so deprives them of opportunities to use existing skills to develop new competencies and perpetuates the need for help (Bronfenbrenner, 1992; Dunst & Trivette, 2009; Skinner, 1978,).

Researchers have asserted that failure to achieve outcomes is not a failure of the family, but a failure of the informal and formal social systems intended to support the family (Rappaport, 1987). Quick fixes, temporary solutions, and lists set families up to become dependent on the help-giver to continue to produce solutions for the family. This potentially sends families the message they are not capable of providing for their own well-being. When help-givers are mindful of a framework for supporting and strengthening families' capacities, they recognize that all families have strengths and the capability to ensure their own well-being. Giving families information and advice does not help families problem-solve how to identify and overcome barriers as they arise, which is a skill all families need to prosper in the long term. The manner in which services are provided determines whether the services have a positive, neutral, or negative effect on families (Bandura & Locke, 2003; Dunst et al., 1994, 2007). Based on decades of research, active parent participation in the help-giving process is a necessary ingredient for positive child and family outcomes. In other words, good intentions are not enough. Professionals must consider how support is being provided so opportunities for families to learn and practice problem-solving skills are maximized.

## EVIDENCE-BASED MODELS FOR HELPING

The field of early childhood intervention has existing frameworks to guide help-givers in supporting and strengthening the family's active participation in ensuring their well-being: caregiver coaching (Rush & Shelden, 2020) and resource-based practices (Dunst et al., 1994; Mott, 2006). When used together, these sets of practices maximize parent participation in the problem-solving process and result in increased family control over the help-giving process and achievement of long-term outcomes.

### Caregiver Coaching Practices

Rush and Shelden (2020) describe the use of a coaching interaction style in early intervention as both a compliment to and operationalization of family-centered practices and capacity-building family support practices. Coaching is used by help-givers to recognize and improve existing knowledge and practices, develop new skills, and promote continuous self-assessment and learning on the part of the caregiver (Cox, 2006; Rush & Shelden, 2020). Coaching is well-aligned with help-giving professions where the focus of the interactions are on building the capacity of the recipient to achieve and sustain outcomes to meet immediate and long-term needs. The purpose of effective help-giving practices in early childhood intervention, for example, are to build the capacity of parents and other care providers, support and enhance parent confidence and competence, and assist parents and others in sustained achievement of desired outcomes (Dunst & Trivette, 2009; IDEA, 2004; Workgroup on Principles and Practices in Natural Environments, 2008).

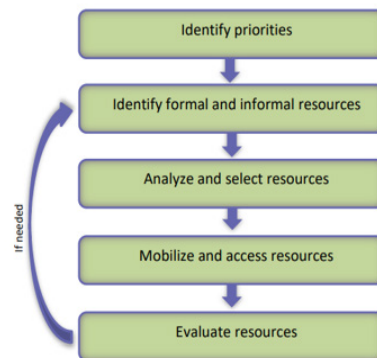
Caregiver coaching is operationalized by five characteristics: joint planning, action/practice, observation, reflection, and feedback (Rush & Shelden, 2020). Joint planning is the process used by the help-giver serving as the coach to engage the caregiver in identifying actions the family plans to accomplish between visits. Action/practice refers to the opportunities during and between coaching conversations for the family to actively engage in the help-giving process by doing a task or practicing a skill or behavior. Observation refers to opportunities the coach uses to witness the family's strengths, abilities, and skills or for the family to see the coach demonstrate a skill or strategy. Reflection refers to the coach's use of reflective questions to (1) build the caregiver's awareness of their current situation and their intended out-

come; (2) help the caregiver analyze past and potential strategies; (3) develop new ideas; and (4) jointly create a concrete action plan that adheres to the family's values and preferences and addresses their priorities.

### Resource-Based Practices

Resource-based practices (RBP) are those used by help-givers to ensure that families have access to the support they need to ensure the well-being of their family members. Resource-based practices consist of a set of steps that when used by help-givers to promote parent/caregiver participation in (1) identifying their priorities; (2) determining existing and potential formal and informal resources; (3) analyzing and selecting desired resources; (4) mobilizing resources; and (5) analyzing the outcomes of the resources (see Figure 1). RBP promotes the active participation of the family and maximizes the family's locus of control in the help-giving process (Estroff et al., 1994; Rotter, 1966; Skinner, 1996).

Figure 1  
*Process for Helping Families with Resources and Priorities*



**Identifying Family Priorities.** Capacity-building approaches to providing family support include identifying family concerns and priorities. Help-givers have a variety of options to become aware of families' concerns and priorities. Help-givers must be mindful to use approaches that promote the active participation of families to ensure that families retain a locus of control when they identify the concerns and priorities with which they would like support (Estroff et al., 1994; Rotter, 1966; Skinner, 1996). Even when families seem overwhelmed, help-givers can support them in learning a process for identifying and sorting out priorities by

implementing specific strategies during their interactions rather than presuming family priorities based on help-giver observations or assumptions. When help-givers set aside their own biases and focus on family-identified priorities, families are much more likely to see the help-giver as respectful and trustworthy, and help-givers are more likely to help families with priorities that are meaningful to them (Dunst et al., 1994).

Help-givers can help families retain control throughout the process of identifying and prioritizing concerns by asking families open-ended reflective questions and listening thoughtfully to the responses. Help-givers can use questions such as, “What are your priorities?” or “What would you like help with?” When families reveal challenging situations, practitioners can ask, “How does that fit in with the other priorities you told me about?” or “How do you want us to help you with that?” The purpose of using open-ended questions is to build the capacity of the parent by promoting ongoing awareness, analysis, and determination of alternatives to address the family’s priorities (Rush & Shelden, 2020).

#### ***Identifying Formal and Informal Resources.***

The way resources are identified and accessed determines how capable families will be in meeting their needs and priorities in the future (Dunst & Trivette, 2009). When help-givers are rushed for time, it can seem easier and more efficient to mediate the family’s need with the immediate provision of a concrete resource. Research shows, however, that when engaging families in the active process of identifying and analyzing existing and potential resources families not only obtain the needed resources, but they also internalize a process for identifying and analyzing resources that can be used in the future. Dunst, Trivette, and Deal (1994) identified three critical reasons why families should be the ones identifying resources rather than help-givers. First, help-givers are not as knowledgeable as families about who is in their informal network of supports and what those supports have to offer. Second, the role of the help-giver is to guide the family through a process that can be internalized and replicated in the future, not to provide the family with a ready-made list of solutions just to meet the immediate need. Third, the investment the family makes in the process is empowering and increases the likelihood the family will approve of the solutions, implement the plan, and have the confidence and competence to face future adverse situations with the same degree of empowerment. Addressing each family priority should be seen as a means to help the family not only meet a concrete need, but also as an opportunity to support the family to practice and

internalize a process for addressing priorities systematically. Learning a process for problem-solving allows families to address their ongoing priorities independently in the future. Help-givers can actively engage families in identifying and analyzing existing and potential resources by asking families about their informal networks of support as well as the formal resources available in the community.

*Informal supports.* Help-givers focus on supporting and strengthening the social systems that impact the family with the understanding that existing social systems are the most reliable and sustainable ways to ensure ongoing support during times of needs (Dunst & Trivette, 2009). Existing social systems are typically referred to as informal networks of support and include the family’s relatives, community or church groups, or friends with whom the family has contact (McKnight & Kretzmann, 1990).

Informal networks of support can be identified using open-ended questions such as, “What have you done in the past to meet this need?” or “Who do you know in a position to provide help?” or “How do other people you know get help with this?” or “What’s your favorite way of organizing tasks that need to be done?” These questions imply to the family that they have information and support and are capable of identifying and using them. The help-giver’s role as coach is to create structure and space for the parent to think reflectively.

*Formal supports.* Formal resources and supports include community and civic organizations, agencies, and institutions (McKnight & Kretzmann, 1990). Although formal resources are predictable and dependable and often are provided with no expectation of reciprocity, they can also be exhausted and are often bound to specific eligibility criteria, therefore should not be used exclusively. For example, many community action agencies provide emergency funding for utilities, weatherization, or even rent. These funds often come with restrictions about how many times or how often they can be accessed.

Help-givers can actively engage families in identifying, learning about, and analyzing formal resources by asking open-ended questions such as, “What community resources do you know about?” or “Where do you typically find information about available resources?” Both informal and formal resources are important components of a family support infrastructure (Dunst et al., 1994). Together, they provide a balance of renewable and dependable resources on which families can rely.

*Analyzing and Selecting Resources.* Analyzing resources refers to the process help-givers use to help families think about the advantages and disadvantages of

their options and consider how the options fit with their family values and address their priority. Help-givers can also help families analyze the costs associated with each of the options. Costs can include financial, social, emotional, or physical tolls using a resource might have on the individual or family system. Given time to systematically analyze potential options, costs, and benefits, families can make informed decisions about how to best use available resources.

Help-givers can help families analyze resources when using a coaching interaction style by asking open-ended reflective questions such as, “What are the advantages and disadvantages of those options?” or “How will those options impact your family?” or “How will that option get you closer to your goal?” As families consider the merit of their options, help-givers can prompt families to make an informed selection using questions like, “Which option is the best fit for your family?” or “Which one of those options would you like to try first?” or “Based on what you know now, what makes the most sense for you and your family?” The help-giver is careful not to impose their own values and biases on the family’s personal decision, but rather empowers the family to use a systematic process for making an informed and deliberate decision.

***Mobilizing and Accessing Resources to Address the Family’s Priorities.*** Mobilizing refers to the act of assembling a resource or support and moving it into action. Capacity-building practitioners ensure families are supported to mobilize and use the resources the family identified and prioritized. Research shows when families maintain control over the use of resources they experience feelings of self-efficacy leading to positive outcomes (Dunst et al., 1988). The role of the family and help-giver (if needed) can be articulated in the joint plan (Rush & Shelden, 2020) that is reviewed from visit to visit. The joint plan documents who is responsible for specific steps, a timeline for when each step will be addressed, and when the follow-up visit will occur. Although the goal is to maximize the active role a family takes in mobilizing their own resources, the help-giver may be asked by the parent to help them learn or practice a desired skill prior to mobilizing the resources (i.e., role playing a conversation with a physician or learning how to access online resources).

Help-givers can help families access the resources deemed most appropriate by the family by asking questions such as, “What are your first steps?” or “Where could you get help with that?” Each of the previous questions are open-ended to promote the active participation of the family during the decision-making process. Help-

givers can also help families identify skills they need to learn to access specific resources, and practice accessing resources through role play. Instrumental support can be provided if needed to help families who need that type of scaffolding to move forward (i.e., “What help will you need from me to get this done?”).

***Evaluating Resources.*** Analyzing the outcomes of the resources happens after a resource has been accessed and the family considers how the resource was helpful or useful in addressing the priority. Attending to the evaluation of the resource ensures the family understands the advantages and disadvantages of the resource (i.e., “What did you like/not like about how that worked?”) and has a plan for how or when to access it in the future (i.e., “When would you want to use that again?”). Families who have experienced disappointment in the effectiveness of a resource can be prompted to think about how their role impacted the outcome (i.e., “What would you do differently next time?” or “How could you have changed the outcome?”), or how they can use their strengths and abilities to shape the resources offered in their community moving forward (i.e., “What do you want to do about it?”).

When caregiver coaching practices are paired with resource-based practices (see Table 1) the capacity-building impact of family-professional interactions are maximized. Table 1 shows the characteristics of a capacity-building coaching interaction style across the top and the steps of resource-based practices for strengthening and supporting family well-being down the left side. The table shows how coaching characteristics can be used during the steps of resource-based practices.

## USING A CAPACITY-BUILDING COACHING FRAMEWORK AND RESOURCE-BASED PRACTICES

Resource-based intervention practices are a linear process that uses capacity-building caregiver coaching characteristics to help families take the lead role in building sustainable habits for future informed decision-making. The process outlined above can be used during any family support conversation. Table 2 shows how the steps within the framework described above (across the top row of the table) can be applied to several high-frequency conversations (down the left column of the table) help-givers encounter.

## CONCLUSION

The purpose of this *CASEinPoint* was to describe

Table 1

*Intersectionality of Resource-Based Practices and Coaching*

|  | Joint Planning  | Action/Practice   | Observation   | Reflection  | Feedback  |
|--|---|---|---|---|---|
| Identifying Priorities                       |   | Promote the caregiver’s role in identifying their priorities and selecting what to address first.   | Observe the caregiver’s level of comfort with the topics and respond with compassion.       | Ask the caregiver to rank their priorities.<br>Ask the caregiver with which of the priorities they want help.                   |   |
| Identifying Existing and Potential Resources |   | Recognize the identification of resources as an opportunity for the caregiver to practice the skill of systematically thinking through options. | Observe the caregiver’s brainstorming abilities and give more time or a prompt when needed. | Ask the caregiver to brainstorm existing and potential options.<br>Ask the caregiver to brainstorm formal and informal options. | Provide additional ideas about resources once the caregiver has had a chance to brainstorm. |
| Analyzing and Selecting Resources            |   | Give enough wait time for caregivers to reflect on your questions and practice analyzing all their options.                                     | Observe the caregiver’s level of confidence with analyzing and selecting the resource(s).   | Ask the caregiver to analyze the advantages and disadvantages of the options.   | Provide encouragement around the analysis the caregiver offers.                             |
| Mobilizing Resources                         | Ask the caregiver about their plan for mobilizing the resource.<br>Ask the caregiver what help they might need. | Give the caregiver time between visits to mobilize the resource.  | Observe the caregiver practice a skill or use the resource.                                 | Ask the caregiver what their plan is and how they will know if their plan is successful.  | Provide information the caregiver might not have about how to access the resource.          |
| Evaluating Resources                         | Ask the caregiver what they would like to keep and what they would like to change about the resource.           |   |   | Ask the caregiver how the resource is helping.  | Provide information about additional resources.   |

Table 2

*Examples of Using a Framework for Effective Help-Giving with High-Frequency Family Support Priorities*

|  | Identifying Priorities  | Identifying Existing and Potential Resources  | Analyzing and Selecting Resources  | Mobilizing Resources  | Evaluating Resources  |
|--|---|---|--|---|---|
| Finding Reliable Transportation                          | Tell me more about your need for transportation?<br>What will it allow you to do?<br>How does it rank/fit with your other priorities? | What have you done in the past to get around when you needed to?<br>What ideas do you have for a long-term solution?<br>What other ideas do you have for helping in the short-term? | How will those ideas help you long-term?<br>What are the advantages of each of those options?<br>What are the disadvantages of each of those options?<br>Which option best matches your family's priorities and values?                    | What are your first steps?<br>What help will you need to put those steps into action?<br>How will you know if they are working?<br>What's your back-up plan?<br>When do you want to revisit this with me?     | How well is your solution working?<br>What changes could you make?  |
| Finding Safe Housing                                     | Tell me more about what you are looking for?<br>How will you know if it's safe?   | What have you done in the past to have safe housing?<br>What ideas do you have for getting safe housing now?<br>Who do you know that can be a resource to you?                      | How will those ideas help you find safe, long-term housing?<br>What are the advantages of each of those options?<br>What are the disadvantages of each of those options?<br>Which option best matches your family's priorities and values? | What are your first steps?<br>What help will you need to put those steps into action?<br>How will you know if they are working?<br>What's your back-up plan?<br>When do you want to revisit this with me?     | How well is your solution working?<br>What changes could you make?  |
| Finding a medical professional/specialist                | What qualities are you looking for in a medical professional?<br>What's your ideal situation?   | Who do you know that fits what you need?<br>What are your ideas for locating the right person/practice?   | How will you decide if the option is the right fit?<br>Which options best match your priorities and values?  | What are your first steps in getting started?<br>What help will you need?<br>How will you know if you have found the right person/practice?   | How did this person/practice match what you were looking for?<br>What changes do you think you need to make?  |
| Planning for Transition from Early Intervention Services | What learning experiences do you want for your child after early intervention?<br>What kind of support would be ideal?                | What are some of the places your child can get those experiences?<br>Who do you know that can be a resource to you?   | What are the advantages of each of those options?<br>What are the disadvantages of each of those options?<br>Which option best matches your family's priorities and values?  | What else do you need to know to make an informed decision/plan? What do you want your next steps to be?<br>What help do you need to implement those steps?<br>How much time do you need before we follow-up? | How did those steps bring you closer to a plan?<br>What else do you think you need to do to prepare for the transition?<br>How is the plan working? |

known about the capacity-building benefits of caregiver coaching to the work of supporting families with their well-being priorities and goals is long overdue. This *CASEinPoint* provides a strong rationale for using caregiver coaching and resource-based practices to engage families in capacity-building interactions. The evidence-based framework provides a means for how service coordinators and other help-givers can assist with the achievement of family support and well-being outcomes.

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