

Using the HFA Reflective Strategies

Frequently Asked Questions (FAQs)

Reflective Strategies General Questions

1. Do we need to document the parent's response to the reflective strategy?

While we do recommend this, this is not required in the Best Practice standards. When you include the parent's response, it paints a clearer picture of how successful the Reflective Strategy was in supporting positive changes in parenting behaviors. All responses should be discussed in supervision. Please remember that your supervisor is ultimately responsible for your documentation.

- **Three recommendations for documenting use of Reflective Strategies**
 - Which strategy did you use?
 - Why did you use it (CHEERS, Service Plan, general home visiting, other)?
 - How did parent respond?
- **Sample documentation** *(please note, these are based on scenarios from the Foundations Community of Practice webinars):*
 - “Used SATP when mom held baby close (H - CHEERS). Mom continued to hold baby close for a few minutes.”
 - “Used FNT when mom shared she did not get the job she wanted. Mom processed and returned her attention to baby.”
 - “Used E&W when dad misunderstood baby's fussiness. Dad was not ready.”
 - “Used ATP for how thoughtful almost-new-mom shared her concerns related to how she was parented—and wanted something different for her unborn baby. Mom looked away (SP - Service Plan).”
 - “Used Problem Talk re finding new day care; dad has set up steps.”
 - “Used Normalizing re rubbing whiskey on gums to soothe teething pain; mom was horrified that whiskey could negatively impact her baby and does not plan to use whiskey again.”
 - “Used ATP re mom and baby's communication; mom smiled and gave baby a hug.”
 - “Used FNT with dad re his experience at work; Jack calmed down and told his son he was sorry.”
 - It is helpful to share MSRs in supervision – especially those that seemed to take more time to self-regulate.

2. *What if we start with sharing some curriculum rather than the Reflective Strategies—would that not be in adherence? Or, do we have to try Reflective Strategies first?*

In a nutshell, the true response is always that “it really depends.” HFA prefers starting with the Reflective Strategies (but not required). Why?

- The beauty of the Reflective Strategies is that they are always “in the moment” responses, which are critical for developmental guidance for parents and the types of intervention that can really make a difference. Using what happens in front of you during a visit is much more relevant to parents (teachable moments), but harder to do.
- What is so powerful about the Reflective Strategies is that parents’ brains are actively and integrally involved in the strategy. In other words, their brains become a part of the strategy. How?
 - *Strategic Accentuate the Positive:* The parent feels the joy and pleasure with their baby which increases their oxytocin levels—it is hard to create oxytocin with curriculum.
 - *Feel: Name & Tame:* Parents are processing and seeking out “feeling words,” so they themselves can self-reflect on feelings. Additionally, when their feelings are shared, they feel “seen” and “heard,” something that may be new to them, and a start for them to be able to “hear” their children’s feelings.
 - *Explore & Wonder:* All of these steps create an empowerment environment in which parents can make decisions that work for them. Step 1 (just noticing) may be all that is needed for baby and parent to connect. If not, Step 2 actively engages the parent’s brain in thinking about the intent of the behavior. If the parent has a “thinking face,” you know that what the parent is thinking about will transfer into other areas of his or her life. This is so powerful to support healthy change in families.
 - Using curriculum rather than the Reflective Strategies can support positive parental behaviors, however its effectiveness is based upon *how* it is used versus *what* is shared (see above).
 - If you are using a curriculum that is focused on “teaching” parents, or didactic, it can be very hard to share information in a way that makes parents feel in charge and competent or encourages parents to “actively think” about what you are sharing.
 - Many parents have not had great experiences in school and may be naturally defensive when others directly tell them or teach them what they need to learn.
 - Using curriculum within teachable moments can be work very well... as long as the parent’s brain stem (no re-traumatization—total safety), limbic system (emotional readiness), and cortex are activated.

3. *Is it okay to document use of reflective strategies for issues on the Parent survey as well?*

When conducting the Parent Survey, staff would not be doing any interventions—just listening and learning the parent’s story. Once the Parent Survey is completed, supervisors and FSSs sit down together and plan what priorities to address and develop strategies to address these (service planning). The Reflective Strategies would definitely be helpful in addressing some of

the priority areas identified in the Service Plan. In fact, boosting oxytocin using ATP and SATP would be critical in increasing parental oxytocin levels for parents who have scored a 10 on item #1 on the Parent Survey.

Reflective Strategies Specific Questions

1. *Feel: Name & Tame: Isn't using Feel: Name & Tame pushing feelings onto the parent that may not be accurate?*

If we share a feeling that does not match the parent's experience, the parent will usually correct us or tell us that is not what they are feeling. It is important in step 2 (asking the parent what they are feeling) to allow some time for a parent to respond before moving to Step 3 (reflecting with the parent what you think they might be feeling). *It takes a minimum of four seconds for a person with a rich emotional vocabulary to identify a feeling. Imagine how long it might take if your emotional vocabulary was limited?*

- This can support a parent to clarify his/her own feelings, which will expand emotional vocabulary. Parents may truly appreciate that you are understanding or trying to understand their experience. The key here is to use the words, "I wonder if you are feeling...." It is important to just be curious instead of "all-knowing" about another person's feelings.
- Please also note that if a parent labels a feeling independent of you, Step 3, *reflecting on what you think the parent might be experiencing*, is optional.
- ***And a Quick Reminder: Feel: Name & Tame is not used to normalize feelings.*** Validating a parent's feelings simply reflects back to the parent how big this feeling may be experienced. This is not a time to share how other parents might feel or how this feeling might be a common one (*as in Feel, Felt, Found*). Rather, a simple, "this is really important to you" is much more supportive and allows the parent to just be heard.

2. *Explore & Wonder: What is the best way to respond a parent is not interested in trying the new activity?*

It is critical that our interactions with families always keep the parent in the "lead." During the webinar, we discussed "when to stop using Explore & Wonder." If the parent does not want to try anything new, stop using the strategy. Sometimes it can be appropriate to use Problem Talk to learn more and to gain understanding, and sometimes it is appropriate to just return back to *being present*. Here are other reasons to "stop using Explore & Wonder." Stop using Explore & Wonder when parents:

- are open to trying a "new way."
- recognize baby's behavior has intent.
- redirect their interest to something else.
- are not interested in trying something different.

3. Explore & Wonder: How would you respond to a parent who is attributing too much intentionality to their child's behavior/cue, for example saying "she is being sassy" or saying the baby is being "manipulative"?

Hearing these types of statements is difficult. If a parent responds in this way (as part of Step 2: What do you think baby is trying to tell you?), it is fine to move forward with Steps 3 & 4 (e.g., #3: "I wonder if baby is really tired and may need a break?" #4: "What do you think?"). If mom says, "no, baby is just being sassy," stop using Explore & Wonder. You could move to Problem Talk to learn more and try to understand the parent's perspective... it could really add insight.

It might be useful to review Victor Bernstein's "Stages of a Healthy Helping Relationship" related to step 3, "Acceptance" (from the *Foundations for Family Support* training). Is this statement or behavior *unacceptable* or is it *disagreeable*? If it is unacceptable, you will want to address it. If it is disagreeable, you will want to learn more about it. Problem Talk can help you learn more.

4. Accentuate the Positive: When a parent seems uncomfortable with ATP and we notice, you suggest that you stop using it (pause) and connect with your supervisor. Does that mean to stop using it all together?

When a parent feels uncomfortable with ATP during a home visit, there are several directions an FSS may take. One is to stop (or pause) using ATP and discuss what happened during supervision, reflecting on the parent's Service Plan (particularly the Parent Survey, to consider the parent's childhood history).

- If this is a one-time occurrence specifically related to a particular content area, it is important to continue to use ATP for other circumstances on a regular basis (once a visit is a good recommendation).
- However, if the parent seems uncomfortable with ATP most of the time, it might make sense to use Problem Talk to learn a bit more about what the parent is experiencing. For example, "I notice that when I share your strengths with you, you tend to look uncomfortable. How does it feel when I compliment you, etc.?"
 - You could also use Feel: Name & Tame to notice the parent is experiencing a strong feeling and validate it.
 - It may also be important to conduct a depression screen to determine if the parent might benefit from more formal mental health services.

5. Accentuate the Positive: Would it be okay to ask the parent "how do you think that impacts or makes him feel?"

As is not uncommon for home visiting, the answer here is, "it depends." If the parent seems pretty in tune in with the child, asking the parent what she/he thinks about the impact, or how she/he thinks the child is feeling is a great idea! If the parent is struggling to connect, as is sometimes the case when the parent has experienced unresolved early childhood trauma, it may be best for the FSS to offer the impact. And it is always best to use the parent's own words, when possible—using the *What I'd Like for My Child* or the *Values* activity.

6. Mindful Self-Regulation: Does the use of MSR get documented in home visit records? How would you document this in Supervision?

Since MSR is not related to the family, but rather to the “self,” it is typically not documented in the family’s home visit record. Whenever you find yourself dysregulated and need to self-regulate (MSR), it is important to share your feelings with your supervisor. To document this in supervision, a supervisor and FSS would together explore the cause of the MSR and document the basis of the reflective conversation, which includes how the supervisor supported the FSS. HFA has a sample form, *HFA Supervision Professional Support (Staff specific)*, that could be used for documenting feelings/issues requiring MSR (the form is located on the [HFA website](#) under [Network Resources](#)). When documenting the content of this conversation, check the “Explore/reflect on impact of the work” box.