

# FAST FACTS

## CO-LEARNING IN ALAMEDA COUNTY

SPRING 2013

EARLY CONNECTIONS: STRENGTHENING EARLY CHILDHOOD SYSTEM OF CARE



### What is Co-learning?

Co-learning is a “promising” practice of intentionally bringing together family members and providers outside of their traditional roles to strengthen their capacity to partner to support early childhood wellness. A facilitated process, Co-learning engages providers and family members in jointly developing training, tools, practices and policies that are family driven and culturally and linguistically responsive.

The goals of Co-learning are to:

- **Strengthen Workforce Capacity** to engage the knowledge, lived experience and assets of family members that are pivotal in building the strengths based, authentic partnerships with families that ultimately support the young child’s well being.
- **Increase access by family members to information and education** about early childhood mental health, child development and system trainings.
- **Build upon provider and family member knowledge and experience** in support of the well being of young children and their families.
- **Develop greater mutual understanding** of provider and family member experiences and constraints in the system and embrace their joint roles as change agents.
- **Improve organizational, service and family-level outcomes** and strengthen early childhood workforce.<sup>1</sup>

“I thought the provider was all powerful and I was a little small family member fighting for my daughter’s rights. Now, I know that sometimes the provider doesn’t have the answer.... Now I am the co-pilot with the provider. I feel that I am very important.”

—Family Member

### The Family Members and Providers Co-learning Collaborative

The *Early Connections Family Members and Providers Co-learning Collaborative Pilot* began as a seven-month program, engaging 9 family members and providers in 2012 and will continue as a key strategy. The Co-learning Collaborative uses a facilitated process that brings family members and providers into the same room to co-create tools and learning opportunities as peers.

#### Current Activities

- **0-5 Welcome Toolkit** that includes low cost and no cost ways for agencies to integrate welcoming practices into their daily operations and home visits
- **Video to highlight the process and role of Co-learning** in supporting the wellness of young children
- **Championing Co-learning in 0-5** through team presentations and agency Co-learning pilots

#### Participating Agencies

- Early Childhood Consultation and Treatment Program of Alameda County Behavioral Health Care Services
- Brighter Beginnings
- Children’s Hospital, Oakland-Early Childhood Mental Health Program
- Portia Bell Hume Center
- Through the Looking Glass
- Our Family Coalition

<sup>1</sup> For more information, see the full evaluation report and presentation.

## FAMILY MEMBERS AND PROVIDERS CO-LEARNING : CORE ELEMENTS



### Accomplishments and Impacts

- Development of the Co-learning Approach as a model for family-member and provider partnering
- Adapted the Co-learning approach to create a cross-systems, bilingual Co-learning team at a 0-5 agency
- Developed and delivered joint workforce and family member training on Positive Discipline
- Changing supervision and training of clinical interns and providers to become more family driven
- Greater trust and mutually respectful relationships between providers and family members
- Increased family members access to education and trainings
- Enhanced family leadership skills
- Adoption of family-driven practices and organizational policies related to home visiting, treatment planning and sharing of young child's diagnosis with family members

### Challenges and Next Steps

- Expanding Co-learning model to scale across the early childhood system of care and beyond
- Providing training and support to integrate Co-learning values and practices in organizations and communities
- Using a Co-learning approach to strengthen other Early Connections efforts

"Being in the same room as family members and talking about things as a group has been good. ... we talk about different topics- personal stories, different points of view, what families might want to know. It has made me think about things differently. When I read treatment plans, I start to think about how the family will experience the language; how would you feel if this was written about your child?"  
—Provider