Abstract for Understanding Latine Families’ Experiences in Early Intervention

Structural inequities hinder access and engagement in Part C Early Intervention Services for minoritized families. In Minnesota alone, it estimated that thousands of children remain unscreened and disconnected from child find efforts (Minnesota Department of Health, 2018). When developmental concerns arise, systems may fail to provide comprehensive evaluation and services for children of color (Magnusson et al., 2017). For example, Black and Latino children are 78% less likely than white children to have their need for EI services met (Magnusson et al., 2016; 2017). These systemic problems lead to missed opportunities for child and family support during a critical developmental period. Systems have not fully address the complexity of family engagement and barriers with the Latine community in accessing and receiving Part C in the Early Intervention Services.

This research study centered Latine families’ voices as a driving force for critical systems change by evaluating caregivers experiences accessing, participating in, and transitioning from, EI in Minnesota. Our central hypothesis is that intentional connections with families of young children with, or at-risk for, delays/disabilities will create meaningful relationships that allow families to openly share their experiences and perspectives on EI. Our aim was to gather family experiences and perspectives on child development, disability, caregiver-child interactions, caregiver-practitioner relationships, to identify specific cultural and linguistic needs that may influence Latine families' understanding, access, and use of our state’s EI system. Our research question was: What are Latine families’ perceptions, beliefs, acceptability, and experiences related to Part C Early Intervention referral, evaluation, service, and transition? We were also interested in exploring how intentional collaboration with families can increase family involvement, empowerment, and advocacy within the EI system.

Families were recruited by, and engaged with, bilingual, Latine researcher with personal experience in EI. Latine caregivers (n=25) from a large Midwestern city who represented diverse economic, educational, and immigration backgrounds participated. Eligibility was having at least one young child with, or at risk for, developmental delays and/or disabilities who was eligible for, or received, EI services; however, the study sample also included families who declined services. A qualitative methodology designed in which a brief surveys were delivered conversationally to all families (questions read by connectors who then filled in caregiver responses online), and some (n=5) also participated in in-depth interviews. Closed-ended questions included, “would you recommend EI to another family in your community?” and open-ended prompts included, “how did you feel when you heard your child was eligible for EI?” Data were analyzed for themes and coded with checks for reliability. Results show in-depth understanding of Latine families’ experiences in, and barriers to, pre-/referral and evaluation, service delivery, and transition from EI. Themes identified include an emphasis on the importance of working within multigenerational families; using/valuing the home language; and building meaningful relationships between families, providers, and systems. The qualitative results highlight families’ lived experiences within EI, barriers, and recommendations for systems change with the Latine community in accessing and receiving Part C Early Intervention Services.