Erikson Institute



Supporting Immigrant Families Case Vignette: Luisito

The following is designed to simulate a case that could be on your caseload, either at your current place of work, or if you were invited in as a consultant. This vignette unfolds with three prompts that provide more and more information about the family as you would learn about them if they were on your caseload. The questions are designed to demonstrate how you are thinking about the families in your care, there are no right or wrong answers.

Background information

Setting

Picture this case in your typical work settings, though some details may not completely fit in your setting imagine it does.

Family demographics

Caregiver: Isabel Contreras, female, 21, Native Indigenous, Achi Mayan, Achi and Spanish bilingual, limited proficiency in English

Child: Luis Contreras, male, 3.8, Native Indigenous, Achi Mayan, Achi native language, Spanish second language, increasing proficiency in English

Child's Sibling: Amanda Contreras, female, 12 months, US born, Spanish English bilingual

Prompt 1

Initial concerns: Luisito has been enrolled in EHS for seven months, with a referral from a community domestic violence shelter. He presents as a sociable and curious little boy. His teacher, Ms. Pani, is concerned about him because he has some difficulties with receptive and expressive language (has difficulties following directions, his language is difficult to understand), has limited exploratory behavior, complains about frequent stomach aches, cries easily and withdraws in response to any kind of distress (if another child takes a toy from him, or the teacher redirects him). He also has a difficult time at drop-off, where he clings to his mother and cries after she leaves. In addition, during drop-off and pick up, Isabel seems to always be in a rush, is at times dismissive of Luisito's emotional needs, or is harsh with him and seems to have expectations that seem beyond his developmental abilities.

Initial Contact: Ms. Pani has called Ms. Contreras to share her concerns about Luisito but Isabel land has not returned the phone calls. Two weeks ago, the teacher and you approached Isabel when she came to pick-up Luisito and proposed setting up a meeting to discuss Ms. Pani's observations of Luisito with the hopes of engaging in a collaborative approach to talk about Luisito's strengths, needs, and possible referrals. Isabel

stated that she does not have the time to come for a meeting; however, you offered to accommodate to her schedule and do a home visit/phone call/Zoom if that was more convenient. You highlighted how Ms. Pani and you would like to talk about Luisito's progress at the program and to get her input about best ways to support him. Isabel accepted reluctantly to meet with you the next morning via zoom.

First Visit: When you and Ms. Pani met with Isabel and shared impressions about Luisito's strengths and needs, Isabel became very upset. She added that Luisito is distractible, fearful, and that he is wetting the bed. She mentioned that parenting him is not what she was expecting and that she feels exhausted caring for him. She shared with you some aspects of her and Luisito's history and his development.

After these encounters:

1. If you were the provider, how would you feel?

2. After this interaction...

(Read the prompts below to guide your response, you do not need to respond to each question)

Guiding prompts: What would you like to know more about this family? What would you say or do? What would be your next steps?

Prompt 2

On your second meeting you learn the following:

During this session, Isabel shares the following history: Luisito and Isabel were reunified approximately 6 months ago after a two-year migration-related separation. Isabel immigrated to the US when Luisito was about 12 months old, and he left him in Guatemala. Luisito lived with his maternal grandparents, two aunts, and his dog "Pocho" prior to immigrating to the U.S. His father is in Guatemala but has not had contact with him since he was an infant. A year ago, the maternal grandparents received kidnapping ransom threats against Luisito; Isabel sent for her son who traveled to the U.S. with other migrants who were strangers to him. Luisito and his adult companions were detained at the U.S. border and eventually he was released

to his mother, and new sister Amanda. Luisito, Isabel, and Amanda (Lusito's 12-month old sister) are currently living in a domestic violence shelter. Amanda is the product of Isabel's relationship with her former boyfriend David who she left about 10-months ago due domestic violence.

Isabel is concerned about Luisito's behaviors, yet overall has ambivalent feelings about him. She feels guilty for leaving him in Guatemala, and does not feel that he is the same child he was when she left him. She is proud of being able to parent Luisito transnationally for about two years (supported him financially and being involved in decisions about his care remotely) while they were apart. She is confused about why she has an easier time connecting with and parenting Amanda than with Luisito.

Isabel is unsure about how the program or you can help her, and wonders why she is here because she is a good mother.

Finally, you learn that Luisito and Isabel are involved in immigration legal procedures including an order of deportation for Isabel.

After learning this new information:

3. If you were the provider, how would you feel?

4. After this interaction...

(Read these questions to guide your response, you do not need to respond to each prompt)

Guiding prompts: What would you like to know more about this family? What would you say or do? What would be your next steps?

5. What kind of supports would you need in order to do your job to best support this family?

Prompt 3

On your third visit you and the mother discuss the following:

Child's Developmental History: Luisito was born full-term and did not present any complications after birth. Isabel was 17 y.o. when she had him and reports that he met all developmental milestones during his first 12 months of life. Isabel is not able to provide details about his developmental progress after that age as she had to leave Guatemala, but states that her mother kept her updated about Luisito as they communicated frequently

Daily Routine: Isabel wakes up at 6 am, gets herself ready, then wakes the children up. She gets them dressed, feeds them breakfast, then drops them off at EHS by 8:30. She participates in English classes from 9 am–12 pm. At 1 pm she picks the children up from school and goes back to the shelter. She gives the children a snack, spends some time with them and then has her own chore, communal house chores, counseling, and or life skills class until 5 pm. At 5, she feeds the children, bathes them, and puts them to sleep by 7 pm. She then prepares for her class the next day and goes to bet at 10 pm.

Isabel's perceptions of the Child's Strengths and Challenges: Describes him as interested in learning, loving with his sibling, strangers see him as likeable. In terms of needs/challenges she states that he is "slow" has difficulties understanding directions, expectations, spaces out, sulks, cries easily, is fearful, rejects physical contact at times, is forgetful, wets himself, is not independent, has difficulties expressing his needs and wants. He cries most days when she drops him off at EHS and clings to her and does not want to stay. Feels that he demands her constant attention. It is challenging to do the things she enjoys because Luisito seems to need time to transition from one activity to the next, so he slows her down.

After learning this new information:

6. If you were the provider, how would you feel?

7. Based on what you know about immigrant families, with this new information what would you have done in the moment/during the visit?

8. After this interaction...

(Read these questions to guide your response, you do not need to respond to each prompt)

Guiding prompts: What would you like to know more about this family? What would you say or do? What would be your next steps?





Supporting Immigrant Families Case Vignette Coding

	Response Number										
	1	2	3	4	5	6	7	8			
Foundational											
Caregiving practices											
Provider relationship with primary caregiver											
Importance of relationships for child development (with primary caregiver, family supports, attachment)											
Strength based approach to working with families/family goal planning/family identifying needs											
Understanding impact of trauma (child development, relationship, immigration)											
Influence of culture on parenting and development; culturally responsive approach											
Supporting child and caregiver in their environment (classroom, home)											
Exploring/explaining child behaviors—generally											
Immigration											
Demonstrates creating safe spaces											
Family history (child, mother, intergenerational, immigration)											
Applying historical, socio-cultural and social justice approaches to service delivery											
Impact of family separations; challenges with family reunions											
Current immigration; immigration status											
Psychological impacts of immigration, and immigration policy											

	Response Number										
	1	2	3	4	5	6	7	8			
General Practice / Approach											
Referrals/resources/further exploration of											
Immigration (legal, other, family preparedness planning)											
Development/HV											
Mental health											
Daily living/routines											
Community support, partnership											
Outside the box supports/ideas											
Domestic violence											
Reflective Practice											
Addressing/identifying/validating uncertainty, distress, emotional pain with families											
Acknowledging feelings that demonstrate secondary effects of the work											
Identifies specific providers support needed (consultation, reflective supervision)											
Demonstrates personal reflections on the work											

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Supporting Immigrant Families Vignette Instructions for Training and Consultation Use

Suggestions for use

Training: Use this with groups to identify unique trainings needs. Code the groups responses, and identify any common areas of need.

Emerging clinicians, interns: Use this tool to identify strengths and areas to further develop, obtain training and provide support around these areas of further growth.

Consultation: Use this tool to identify unique needs in a consultation group or individual consultation. Code the responses and identify areas of need. Use the coding tool with material shared in a consultation space (i.e., case presentation) to reflect on these important principles.

Supervision: Use this tool in reflective supervision as a framework to discuss and reflect on the work with frontline providers.

Instructions

- 1. Have the participant complete the case vignette.
- 2. Review coded themes and topics.
- Review 1 response at a time and identify coded themes and topics within that response. Indicate that a topic/theme is mentioned in that response by checking a box in the corresponding column and row. See below.
- 4. After completing all 8 responses, note which topics/themes were not checked. The areas that were not checked can be considered areas of growth for the supervisee, those with numerous checks can be considered areas of strength.

Filling out the Case Vignette and Vignette Coding sheets

Sample: Case Vignette, Prompt 1

the sc	aool.
2. Afte	this interaction
(Read t	he prompts below to guide your response, you do not need to respond to each question)
Guiding	prompts:
What w	ould you like to know more about this family?
What w	ould you say or do?
What w	ould be your next steps?
Myne	xt steps with this family would be to work to <mark>build trust with this parent.</mark> I would <mark>describe my</mark>
and ex	plain that I work with parents and children to provide support for things that may be difficu
woul	also name the cultural differences and come up with a plan for our language barriers. I would
	ing current strengths and ask about what is most concerning for the parent at this moment.

Sample: Case Vignette Coding sheets, Foundational and Reflective Practice sections

	Response Number							
	1	2	3	4	5	6	7	8
Foundational								
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Importance of relationships for child development (with primary caregiver, family supports, attachment)								
Strength based approach to working with families/family goal planning/family identifying needs								
Understanding impact of trauma (child development, relationship, immigration)								
Influence of culture on parenting and development; culturally responsive approach								
Supporting child and caregiver in their environment (classroom, home)								
Exploring/explaining child behaviors—generally								

Reflective Practice				
Addressing/identifying/validating uncertainty, distress, emotional pain with families				
Acknowledging feelings that demonstrate secondary effects of the work				
Identifies specific providers support needed (consultation, reflective supervision)				
Demonstrates personal reflections on the work				