

USING VIGNETTES

Three (3) vignettes are available to provide some content for role plays in RBI training. Each mother: Lynn, Ophelia, and Ruth, has some special circumstances that will make each of the groups' experiences unique. Lynn's family situation isn't complicated, but her daughter has considerable developmental disabilities. Ophelia is on her own a lot and has a child who doesn't sleep or eat. Ruth is a younger mother, living with her grandmother. Each vignette takes only a couple of minutes to read.

Procedures

1. Divide into small groups of 3-6
2. Group selects
 - a. One or two parents
 - b. Primary interviewer
 - c. Secondary interviewer ("second person")
 - d. Observers
3. Distribute vignettes about Lynn, Ophelia, and Ruth, randomly and equally
4. "Mothers" read vignette, while other team members receive instructions. Professional team members should stay in character, and that character should be the best professional one can be (i.e., don't try to play a "bad" interviewer)
5. Tell "mothers"
 - a. Not to exaggerate, making the interview very difficult
 - b. To stay in character
 - c. To make up details, because the vignettes are short
6. Tell the groups to begin an RBI, starting with introductions and the interviewer giving the reason for the meeting.
7. Trainer wanders from group to group, interrupting seldom. The most common feedback role players needs is:
 - a. Ask more details about child and family functioning in routines;
 - b. Don't fall into ask, listen, write; ask, listen, write; ask, listen, write...; it should be more like ask, listen; ask, listen; ask, listen – with writing happening while listening (i.e., few gaps between the parent's response and the interviewer's reaction or next question);
 - c. Use active listening
8. After 20-30 minutes, tell the groups to move to the end of the routines, asking the two optional questions if they want to.
 - a. Remember that many people forget to **recap** the starred items; they assume the starred items are the outcomes.
 - b. Prompt groups to go to outcome selection.
9. Prompt observers to give feedback, preferably with the RBI Implementation Checklist. The whole exercise normally takes 30-45 minutes.
10. Debriefing, report back discussion
 - a. Ask parents what the interviewers were like
 - b. Ask interviewers what the experience of interviewing was like
 - c. Ask observers
 - i. How the interview went
 - ii. What the experience of giving feedback was like
 - iii. Ask interviewers what the experience of receiving feedback was like

LYNN

You are 28 years old, with a college degree. Your husband, Mike, is a manager for Home Depot. He makes an OK salary, but has to work long but regular hours. He leaves at 6:30 a.m. and returns about 6:00 p.m.

You have a daughter, Nona, who has born with hydrocephaly. She has been shunted six times, but things have stabilized with respect to her hydrocephaly and the shunt. She is 22 months old and is delayed globally. She has just learned to walk, but has no functional language. Her play skills are immature. She like TV and has a good sense of humor. Her temperament is easy, but she does seek attention. Overall, she is not very independent in daily routines.

Make up the other details! Use your own or others' experiences to flesh out this story. You will need to talk about daily life. This is a family that manages quite well. Nothing dramatic is going on, but you are concerned about Nona's future and you sometimes are frustrated because Nona doesn't get much out of her daily routines, is quite dependent, and has only rudimentary communication skills.

OPHELIA

You are 32 years old, with a master's degree in elementary education. Your husband, Peter, is on the road much of the time, selling medical equipment. He makes good money.

You have a son, Quentin, who does not sleep or eat. He might go to sleep at midnight, but then wakes up at 2:00 or so. He doesn't cry but he makes noises and you wake up. It takes 30 minutes or more to get him back to sleep. Sometimes you fall asleep, while he is still awake. He seems to get very little sleep, and you sure are not getting enough. You are completely sleep deprived, which makes you depressed and worn out. If Quentin does get back to sleep, he'll be up again in a couple of hours, and the same thing starts all over again. As for his eating, he eats very little. He is 20 months old, and in the bottom 5th percentile for weight for age. He can walk and put words together. He can play quite nicely with toys, but he won't eat or drink enough. He takes some amount of milk in a cup with a straw, but then refuses any more. He takes a few bites of spoon-fed food, but then refuses any more. He takes a few bites of spoon-fed food, then refuses any more. You are concerned about his lack of weight gain and his nutrition.

Make up the other details! Use your own or other's experiences to flesh out this story. You will need to talk about daily life. This mother manages quite well, but just on the edge of sanity!

She is sleep deprived, depressed, and worried about her son's health.

RUTH

You are 19 years old and left school some time in high school to have your son, **Samuel**— named after Samuel L. Jackson. You were in special classes in high school, and even at 18, when you left, you were still in the 10th grade. Samuel's biological father is no longer in the picture. He was long gone by the time Samuel was born 7 months ago.

You don't really understand what's wrong with Samuel, but he is hard to hold like other babies, because he gets stiff. He can't hold his bottle. His fussy. He is very pretty, when you put nice clothes on him. You like to dress him up like a little doll rapper. The baby doctor at the health department got ECI involved, but you don't know what they can do for you, and you are a bit worried that they might think you can't handle the baby. Most of the time, you try to keep him happy, but you don't really know how to play with him, what he can do, or anything. He seems like this cute, but fussy little creature who doesn't much like people. Your days are long; you watch a lot of TV and talk on the phone to your friends. You live with **your grandmother** who tells you what to do all the time. She acts like she knows what the best thing for Samuel is, but she won't watch him for you very often. You don't have a car, so you don't get out very much. Sometimes, a friend will come by and pick you up, and you usually have to take Samuel with you.

Make up the other details! Use your own or others' experiences to flesh out this story. You will need to talk about daily life. You are mostly lost. You can describe your bring daily routines, but you have a hard time answering open-ended questions about those routines; you just never knew to look for some things. But when the interviewer asks you yes-no questions, you can usually answer them. Your attitude to the interviewer is cooperative but guarded; you're not quite sure whether she represents the same people who might take Samuel away from you.

SANDY

You are 27 years old and you stay home with your son, **Brandon**. Your husband, **Charlie**, works in information technology (IT). Your parents and two sisters, with their families, live fairly nearby. Charlie doesn't like one of these sisters. His parents and one brother also live nearby.

Brandon, who is now 27 months old, was born prematurely and has shown delays in all areas. Right now, he uses single words and a few two-word combinations, he walks and runs, he is in diapers and a crib, and he is very social (says hi to everyone he sees in the grocery store).

You are concerned about his clumsiness: He has difficulty

- climbing ladders to swings,
- sitting down in the right place on a swing,
- getting on and off his riding-toy horse,
- running without falling over objects on the ground (e.g., toys lying around in the yard),
- changing surfaces (e.g., trips when goes from the driveway to the grass), and
- going down stairs, even when his hand is held, if he gets distracted.

At diaper change, his legs seem no more floppy or stiff than other little kids you've known, and you've known plenty through nannying and your sisters' children. Brandon can be very precise in picking things up and in pointing to pictures in a book, but he still spills a lot with spoon feeding (i.e., turns the spoon over on the way to the mouth) and he can't stab food with a fork and take it to his mouth. He doesn't spend long with toys or watching TV and likes to be with you, which makes dinner preparation time difficult.

Charlie tries to distract him, by calling from the living room, "Come here, son, and leave your mother alone," but he doesn't actually rise to get Brandon. If he is with Brandon, he doesn't know how to keep him busy and playing happily. When Charlie first comes home, he tries to unwind by checking things on his phone rather than playing with Brandon or talking to you. After dinner, though, Charlie will clean up, take charge of bath time, and do the bedtime ritual. The two of you share these responsibilities.

Make up the other details to flesh out this story. You will need to talk about daily life. You wonder whether you are doing everything you can for Brandon; your bad back (two surgeries so far) and weight make you less active than you'd like. You wish your relationship with Charlie were better and that he enjoyed being Brandon's father more.