Strategies for Using Video in Early Intervention  
By Larry Edelman

Video can be a very useful tool for early intervention practitioners and teams working with young children and their families. Among the many purposes of using video are:

Evaluation and assessment: Some young children become ill at ease or withdrawn around strange new people; hardly a conducive situation for accurate assessment. Having only one assessor video an assessment can help portray a more accurate picture of the child’s participation, behavior, and functioning without the intimidating presence of a number of unfamiliar people. The video can be used to gain the input of practitioners who did not attend the assessment session.

Team consultation: Many early intervention teams work through a primary service provider (PSP). Although other team members might occasionally participate in consultation visits, the PSP provides most of the direct contact with the family. Video can help the PSP and family benefit from the expertise, perspectives, and ideas of other team members. Video allows other team members to see the child “in real time,” in the context of everyday routines, activities, and relationships, so practitioners have enough information to offer input.

Collaborative planning, informational support, and problem solving: Videos of children can be watched by families and practitioners together to plan intervention strategies and solve problems together. Families have reported that watching video of their children (and themselves) with their early intervention team helps them feel like an equal member of the team.

Progress Monitoring: Video can be a very useful tool for collecting and organizing observational information for ongoing, authentic assessment. In addition, families report that they appreciate having the video documentation of their children’s progress.

Staff training: Videos of children and families in context of their typical daily routines and activities can be used to orient and train practitioners in a variety of competencies, including discipline specific skills, home visiting, consultation, coaching, observation, problem-solving, communication, and collaboration. A bank of video clips can be used for workshop and conference presentations.

Supervision: Videos can be powerful tools to support reflective supervision and continual quality improvement efforts.

Make Sure Families Understand and Agree to the Use of Video

Provide information, early on while building your relationship with the family, to help families understand the uses and benefits of video; don’t wait until a visit in which you will want to video. Discuss the many benefits that video provides:

- A way to get perspectives and ideas from all team members.
- A strategy to equalize the roles of family members and practitioners as they both become collaborative “watchers” and assessors. Video allows the entire team (including the family) to look at the child together and encourages collaboration in developing individualized plans and solving problem.
• Documentation of their child’s development and progress (a copy of all videos should be given to the family).
• Tools for staff development and supervision.

ALWAYS obtain the family’s written consent before videotaping or photographing.

• Assure parents that video will only be used with their consent for the specific purposes outlined in your consent form, e.g. at team meetings, to be shared with other assessment and/or intervention partners, for supervision, as parts of training and educational programs, etc.
• Prior to any taping, offer parents an information sheet that describes the “who, why, and what” of videotaping and how videos might be used.
• Teams that are part of health systems will need to be sure that their consent form is compliant with the Health Insurance Portability and Accountability Act (HIPAA) regulations. For more information visit: http://www.hhs.gov/ocr/hipaa/.

Quick and Dirty Technical Guidelines for Videotaping

Practitioners don’t need to worry about producing broadcast quality documentaries, but a little quality will make the videos more useful. Below are some general guidelines.

Learn how to operate the camera: Learn how to operate the basic functions including turning the camera on and off, zooming, charging and changing the batteries, using the viewer, etc. Also learn how to connect the camcorder to a TV monitor and use it in VCR mode.

Avoid jerky motion: When you will be videotaping just the child and the family, you might handhold the camera. Practice pointing and shooting the camera in ways that avoid jerkiness and excessive camera movement by stabilizing your arms against your body or a piece of furniture.

Frame the shot: Be sure to capture the action that viewers will need to see. Avoid “cutting off people’s heads” or shooting their backs rather than fronts. With young children it is sometimes helpful to shoot from the floor.

Be aware of lighting: You will get better results by being aware of the natural lighting and using it to your advantage, e.g. avoiding shooting into sunlight.

Learn how to use a tripod: When videotaping yourself interacting with the child and family consider using a tripod. Place the videotape somewhere in the room so that it will; capture all the action and you can just let it run during the visit.

Capture decent quality sound: For many purposes it is important to capture good sound, e.g. children’s language development, parent-child interactions, etc. Place cameras strategically, e.g. avoid videotaping right next to a blaring stereo.

Practice: Take some practice video and watch it with colleagues and get feedback on the technical merits of your work. Ask your colleagues what they need to see in order to provide consultation on children. Practice enough so that you will be well at ease operating the camcorder.

Be prepared: Be sure that you keep blank tapes, charged batteries, a power cord, and consent forms on hand. It might be useful to purchase a battery charger that can be plugged into a car so that batteries can be charged while traveling from visit to visit.

Avoid making a big production out of it: This last point might seem to contradict the tips above, but if you are practiced and prepared, video taping should be a natural and comfortable process for you and the family.
What to Videotape?

Sometimes the opportunity for videotaping comes up at the spur of the moment when you see something interesting and ask the family permission to pull out your camcorder and shoot. At other times, you may want to plan with parents prior to a visit the taping of a specific routine or activity. When you plan in advance with families, clarify the routines or activities to be shot and the “who, what, when, and where.” Following are some tips from practitioners who use video in their work:

- During visits with a consulting team member, the PSP usually does the taping.
- A child might be taped participating in a routine or activity alone, if that is typical, or with one more parents. Interactions with family members (including brothers and sisters, grandparents, cousins, etc.) and other familiar people (friends, neighbors, other caregivers) can be very useful.
- For the first several minutes, videotape the routine as it usually happens, with the family interacting with the child. During this time avoid interrupting the routine with your feedback or suggestions (be sure to discuss this process with the family ahead of time). This provides a good record of how this routine typically occurs.
- After the first several minutes you might want to ask the parents to modify something to see what happens, e.g. adapt the materials, furniture, or equipment, try a different activity, try an alternative position, or provide a different kind of support. Keep in mind that families vary in the amount of facilitation or feedback they ask for, or feel comfortable receiving, during taping.
- Tape just long enough to capture the activity or routine; ten minutes is often plenty.

Watching Video Together

Time is valuable; avoid wasting precious time with families and team members by having to search through tapes for the part that you want to show. Cue up the parts of the tape that you want to show before the meeting or visit. Some practitioners who are video enthusiasts even edit the video before showing it. There are many ways to watch the video. When video is used for team consultation, plan with the parents how they would like to see it used. Following are some typical ways in which families and other team members use videos.

- The family and PSP might watch the video together and then decide which other team members they would like to show it to for consultation.
- Team members watch the video with the family in their home. After watching, the group discusses their observations and then brainstorms ideas for next steps.
- The video might be shared at a team meeting. If so, parents should always be invited to attend, but, if they prefer, they can rely on the PSP to bring them the other team members’ perspectives and ideas.
- The video can be given to a team member with specific expertise to watch individually and provide feedback.
- Videos of children and families in context of their typical day are valuable training tools that can be used to orient and train new team members to the early intervention process. You might have new team members watch videos alongside more experienced team members. One strategy is to ask all team members to comment on the child “outside of their primary discipline,” speaking to all areas of development. This exercise is good practice for learning about other disciplines, discussing one’s perspectives in clear, jargon-free language, and
looking at the whole child in context of his or her everyday routines, activities, and relationships, rather than focusing on one specific developmental domain.

- Supervisors and practitioners can watch videos of the practitioner delivering services as part of reflective supervision. Along with key questions and open, supportive dialogue, video can help to promote self-knowledge and growth.

- Videos of team meetings can help team leaders and team members become more aware of their strengths and weaknesses as and contribute to continual quality improvement.

Suggestions for Getting Started

If your team has never used video before, consider some of the following steps.

Suggestions for video camcorders.

- A small camera that uses the Mini-DV format.
- Purchase a carrying case, extra batteries, blank tapes, a tripod, and cable for connecting the camcorder to a monitor.
- Camcorders frequently need repair: consider purchasing an extended warranty.

*Have each team member learn how to operate the camcorder.* There are a variety of ways to learn: use the manual, have a salesperson teach you, have another team member teach and coach you, ask your kids for help.

*Have a team discussion.* Have your team agree to the purposes for which you will use video. Have team members share what they need to see in the videos that they will review for consultation. Agree to a system for signing out the camcorder. Develop policies around the team’s use of video; invite parent representatives to participate in the planning.

*Learn and practice shooting skills.* Set aside time at a team meeting to take turns video taping other team members in a simulated home visit. Then watch the video together and offer constructive feedback on video techniques. Shoot indoors and outdoors.

*Develop materials for parents.* Create a consent form. Consider producing an information sheet for families on the benefits and uses of video tape.