

Westchester Institute for Human Development and
New York Medical College

2013-2014 LEND: FAMILY MENTORSHIP EXPERIENCE

Family Visit Impressions and Reflections

Trainee: _____

Date: _____

1. What did you feel were the particular strengths of this child/children and family?
2. Do you think that formal systems of support (such as schools, agencies, physicians, etc.) are working in partnership with the family on behalf of the child? Why or why not?
3. Do you feel that this family has been successful or challenged in building a network of informal, natural supports (such as extended family, friends, neighbors, congregations, etc.)? Why?
4. Do you feel that it has been easy or difficult for the family to advocate in partnership with professionals in order to access needed and desired services and supports to address their concerns for their child and family? Why?
5. What do you think were the more positive or challenging aspects of family, school and community inclusion and participation for this child and family?
6. How did this experience influence your views on disability, family and culture?
7. How will this experience change your approach to working with families of children, adolescents or young adults with disabilities throughout the lifespan?