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Ecocultural Theory as a Context for the Individual Family Service Plan

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Although PL 99-457 mandates a family focus to early intervention, there is a limited theoretical and empirical base to guide implementation of the new law. Ecocultural theory, which considers the sociocultural environment of the child and family, is proposed as a framework for designing intervention. To illustrate this theory, case material is selected from two ongoing longitudinal studies of families with young children with developmental delays, etiologies unknown or uncertain. Several aspects of ecocultural theory are used to illustrate its usefulness for intervention: a social constructivist perspective; the interconnected and hierarchical nature of the ecocultural niche; and the use of family-level outcomes as well as individual child outcomes. Implications for developing Individual Family Service Plans are discussed.

The family focus of PL 99-457 makes intuitive as well as conceptual sense; as such, it reflects the “best practices” in early intervention. Nevertheless, interventionists are rightly apprehensive as they take on this expanded role. Many of their concerns are practical. How comprehensive should the Individualized Family Service Plan (IFSP) be in terms of delineating family “needs”? Where does professional responsibility end? What about accountability? The IFSP requires new approaches and practices from the many disciplines, institutions, and agencies that will be involved in serving young handicapped children and their families (Johnson, McGonigel, & Kaufmann, 1989).

While practitioners in early childhood special education (ECSE) have a long history of working with families, many of the other disciplines involved in infant services do not have the same tradition. Thus, professionals in ECSE are increasingly being called upon to take a leadership role in this area. Already the field has rallied to develop guidelines and recommended practices for the development of IFSPs (Johnson et al., 1989). The task has been complicated by the fact that, until recently, theory and training in ECSE have focused almost exclusively on the individual child. This is largely because the prevailing paradigm in ECSE has been developmental psychology (Edgar, 1988), which has focused on child dimensions, usually conceptualized in relatively narrow cognitive terms. Likewise, program evaluation in ECSE has been influenced almost exclusively by develop-
mental psychology and has relied on child-focused measures of two kinds: tests standardized on nonhandicapped populations and criterion-referenced assessments.

The shift to family-based assessment and intervention has focused attention on the family-research base. Previous work on families with handicapped children has been criticized for being atheoretical (Burden & Thomas, 1986; Crnic, Friedrich, & Greenberg, 1983; Gallimore, Weisner, Kaufman, & Bernheimer, 1989; Winton & Turnbull, 1984), and for focusing on “anticipated pathology” (Crnic et al., 1983, p. 126). With a few notable exceptions (Bailey & Simeonsson, 1986; Fewell, 1986; Seligman & Darling, 1989; Turnbull, Summers, & Brotherson, 1986), family research in the past was univariate, and measures of family status were distal, value-laden, and pathology-oriented (Longo & Bond, 1984).

Contemporary examples of more robust and comprehensive conceptualizations include work by Bailey and Simeonsson, 1986; Crnic et al., 1983; Fewell, 1986; Seligman and Darling, 1989; Turnbull, Summers, & Brotherson, 1986), family research in the past was univariate, and measures of family status were distal, value-laden, and pathology-oriented (Longo & Bond, 1984).

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Hill’s ABCX Model of family crisis (McCubbin & Patterson, 1983) has also guided research on families with handicapped children. In this model, A is assigned to the stressor event, which interacts with B, the family’s crisis-meeting resources, which in turn interacts with C, the way in which the family defines the event. X is used to signify the crisis, or the impact on the family of A, B, and C. The model has been used by Wikkler (1986) to examine the impact of transitions on families with handicapped children and by Bristol (1984) to predict successful family adaptation to autistic children.

These more comprehensive and systematic ecological theories of family adaptation represent a welcome shift away from the narrowly drawn pathology perspectives of the past. However, in some of these new ecological “circle” theories (c.f. Bronfenbrenner, 1979), the emphasis on interrelatedness and complexity of social-ecological influences on the family is problematic. The new “ecological” conceptualizations add a rich array of variables to the impoverished list of earlier “pathology” models, but there is no road map to guide their application. Which dimension (Turnbull) or orientation (Dunst) is the most salient? “If everything is plausibly connected to everything else, how should the different levels or units of analysis be organized? There is no criterion for choosing variables or features to include and exclude at each ecological circle” (Gallimore et al., 1989, p. 217).

There is also the problem of linking forces defined by the increasingly distal “circles” of family ecology to the family and to individuals (including the target child) within the family. It is intuitively appealing and correct to assume that social, economic, and other material features of a society affect individuals, but it is also necessary to specify the mechanisms through which such influence
occurs. Unless those mechanisms are defined in observable terms we are left with less than a fully empirical account of the effects of social/ecological factors on families and children.

One ecological theory attempts to deal with these and other problems that have arisen since the rekindled interest in "Lewin-type" ecology theories in the 1970s (e.g., Bronfenbrenner, 1979). This theory—ecological/cultural (hereafter ecocultural)—combines recent developments in several disciplines and is intended to be crossculturally valid. It is derived from the psychocultural model developed by John and Beatrice Whiting (1975; Whiting, 1976, 1980; Whiting & Edwards, 1988) and their students and associates (LeVine, 1977; Munroe, Munroe, & Whiting, 1981; Super & Harkness, 1980, 1986; Weisner, 1984; Weisner & Gallimore, 1985).

Ecocultural theory is close to and consistent with recent research on families in ECSE. It takes the perspectives of the family (family goals, values, and needs) into account and is comprehensive in its view of the family environment. It also extends or elaborates family systems theories and ecological theories in several ways. First, ecocultural theory explicitly includes family-constructed "meaning" of their circumstances (e.g., child's handicap refracted through the lens of family goals and values) as well as their proactive responses to those circumstances and meanings. Second, in ecocultural theory a critical unit of analysis is daily routines (or activity settings) that are created and sustained by ecocultural forces. Daily routines and activities are critical because they mediate ecocultural effects on the more familiar units of analysis—individuals, interaction dyads, or families. Finally, ecocultural theory is distinguished by its applicability to families in all cultures, because the theory is based on the cross-cultural literature (Weisner, 1984). The hierarchy of ecocultural niche features (see Table 1) that the theory proposes is explicitly intended to apply to all families. Each of the feature domains represents variations in family niches that have been reported in the literature as having some impact on families and child development.

Families in all culture groups will have different "niche profiles," though we predict that there will be many similarities across families. Whatever the degree of difference among culture groups, we propose that assessment of the niche domains will provide a meaningful, nondiscriminatory, and non-judgmental description or assessment of the

Table 1: Domains that Constitute the Ecocultural Niche of the Family

| 1. Family Subsistence, the Work Cycle and the Economic and Financial Base |
| 2. Public Health and Demographic Characteristics of Family and Community |
| 3. Home and Neighborhood Safety |
| 4. The Division of Labor by Sex, Age, and Other Characteristics, Including Domestic Task and Chore Workload |
| 5. Childcare Tasks: Who Does Childcare, and How it is Organized |
| 6. Roles of the Father and Others in Childcare |
| 7. Composition of Children's Peer and Play Groups: Who Participates, Age, and Sex of Groups |
| 8. Structure and Quality of Marital Role Relationship |
| 9. Networks, Supports, and Organizational Involvement for Women |
| 10. Multiple Sources of Child Cultural Influence Available in Community |
| 11. Sources of Parental Information Regarding Children and Family |
| 12. Degree of Community Heterogeneity Influencing Family |

Adapted from Weisner (1984).
ecocultural niche of a family. In fact, we believe that ecocultural theory avoids invidious assessment of differences between groups by including the family’s (or culture’s) own values and goals within each ecocultural assessment. It also provides an empirical basis that avoids the dangers of comparisons that always favor the majority or dominant groups; culture is “unpacked” into its constituent elements, so that comparisons are based on specific circumstances. These constituent elements of culture are the ecological/cultural domains and variables presented in Table 1.

We have selected three aspects of our ecocultural model to utilize in discussing its application to work with families: the social constructivist perspective; the interconnected and hierarchical nature of the ecocultural niche; and the use of family-level outcomes as well as individual and child outcomes (Gallimore et al., 1989; Weisner & Gallimore, 1989). To illustrate ecocultural theory, selected case material will be presented from two longitudinal studies in progress at UCLA: The CHILD cohort (Gallimore et al., 1989; Nihira & Bernheimer, 1989; Weisner & Gallimore, 1989), and the REACH cohort (Bernheimer & Keogh, 1982). In both studies, the samples were confined to Anglo children with mild to moderate developmental delays, etiologies unknown or uncertain. Children with mental retardation associated with chromosomal conditions, children whose delay was secondary to emotional pathology, and children whose mothers were known to have abused drugs or alcohol during pregnancy were not included. A total of 103 children were included; 58.3% of them, boys. At entry into the CHILD cohort, the mean DD child chronological age was 41.8 months (SD = 6.2; range = 32 to 55). The mean Gesell Developmental Quotient was 72.32 (SD = 15.97; range = 38 to 117). All but 18 of the children had DQs below 90, and all 103 had significant delays in one or more areas (motor, speech, behavior, or cognition) in spite of some relatively high DQs. Project REACH served as the model for sample selection in Project CHILD, and at entry to the respective projects, the cohorts were comparable in terms of child status.

Case materials for the CHILD cohort were collected, analyzed, and reported according to systematic case study procedures (Kaufman, 1988; Levine, Gallimore, Weisner, & Turner, 1980; Spradley, 1979; Werner & Schoepfle, 1987). Direct quotations from the interviews are presented, with clarifying contextual material added. The selection of illustrative material followed these criteria: First, cases were chosen that are representative of significant features of the entire cohort of 102 families, and of subsets of the families, to illustrate principles, phenomena, and variables of interest. Second, significant and potentially significant variations within the entire cohort are presented. Third, staff consensus regarding this material was used to check on its validity. If available, multiple data sources were used for specific points. Although the illustrative materials presented here are drawn from Euro-American families, studies under way at UCLA are applying ecocultural theory to Asian-American and Latino families.

THE SOCIALLY CONSTRUCTED ECOCULTURAL NICHE OF THE FAMILY

The idea that each family is adapting to a niche is fundamental to ecocultural theory. The term niche is familiar in everyday English and has numerous synonyms and associations. Applied to families, however, the concept of the niche requires some extension.

In one respect the ecocultural "niche" of the family has a familiar meaning: the term implies evolution through time and adaptation to the constraints imposed by the subsis-
tence base, the climate, and the political economy of the region. A niche reflects the material environment and ecology as traditionally defined in social science (features like income, public health conditions, housing and space, transportation, and the distance from kin or services). Super and Harkness (1980, 1986) first used the term to describe the “developmental niche” in terms of physical and social settings, child-care strategies of a culture, and the beliefs and values of caretakers. In comparative and cross-cultural studies of human development, the ecocultural niche can be more broadly defined as describing the larger sociocultural environment surrounding the child and family (LeVine, 1977; Ogbu, 1981; Super & Harkness, 1980; Whiting, 1980; Whiting & Whiting, 1975).

But a family’s niche is also a product of a social construction process—through the capacity of human beings to organize, understand, and give meaning to their everyday lives. People act on and respond to their ecology to make it work better for them. While our economic lives tend to be resistant to social and personal maneuvers, they are not entirely so. There is some flexibility, particularly in American society which provides latitude as to where we live and work, how we organize and manage our families, and how we define acceptable personal and family lifestyles (Weisner, 1986; Weisner, Bausano, & Kornfein, 1983). As a result, while we all react to the press of the material ecology, we can also be proactive. Among other factors, the actions people take are influenced in part by cultural and personal beliefs and values.

Accommodation is our term for these proactive efforts of a family to adapt, exploit, counterbalance, and react to the many competing and sometimes contradictory forces in their lives. People can change jobs, residences, doctors, daily schedules; learn new child-rearing skills; join support groups; redistribute domestic chores; adopt new beliefs and values; among a wide range of options available to U.S. residents. In other cultures, other accommodation tools may be available, though the range of options in many societies is narrower.

Thus, ecocultural theory construes a niche as a person’s and family’s cultural, as well as material, place. The terms ecocultural or ecological/cultural are used to capture both the material and socially constructed qualities of family niches. By incorporating socially constructed cultural features into the definition of family niches, ecocultural theory treats families as more than hapless victims of implacable social and economical forces. Although they are strongly affected by these forces, families take individual and collective action to modify and counteract them. From this mix of forces and actions, families construct their ecocultural niches. Thus, ecocultural theory takes what is described as a social constructivist perspective (e.g., Bruner, 1989; Scarr, 1985).

This is a theory sensitive not only to variations in socioeconomic and material factors that ECSE professionals know have great impact, but to other aspects of family life that must be taken into account in writing and implementing Individual Family Service Plans (IFSPs). We believe that ecocultural theory can help meet Burden and Thomas’ (1986) challenge of providing a “conceptual framework that enables us to understand why some parents think, feel and act in certain ways, while others think, feel, and act entirely differently” (p. 140). To illustrate, we first examine the role of cultural and personal beliefs and values in a family’s social construction process. Next, we examine the role of constraints and opportunities, or the loading families attach to the features in their niche.

Ecocultural theory proposes that the environment around the family includes not only material conditions (income, neighborhood characteristics, and workload time and effort,
for example), but also families’ “meanings,” values, and goals regarding their ecocultural circumstances, as well as their proactive efforts to change their niche. With regard to family meanings, family income has an impact on the child, but so does the amount the family wants to have and the meaning money has in their lives. Some families have average or less income and are content; others are galvanized into action to increase their wealth and standard of living. For some this is strictly a material issue; for others it is linked to their achievement concerns regarding occupational and social status. A similar analysis can be applied to other meanings in a family. As example, what is the meaning of the workloads of each family member? Are they burdened by work? Do fathers prefer less market economic activity or more? Do mothers subsume child care in their cultural meanings of work, or some other meaning category?

In our cohorts of families with a child who is developmentally delayed there are many illustrations of the impact of family meanings and of the values and goals that underlie those meanings. The effects are seen in the family’s econiche, as reflected in the daily routines of parents and children (Gallimore et al., 1989; Weisner & Gallimore, 1989). For example, families with “familistic” values develop different accommodations to raising a child with developmental delays than do those focusing primarily on career progress. But the impact is not always simple. Consider two families, in which both sets of parents are career-minded. All parties attach a high priority to professional advancement and financial success. But in one family, economic advantage is used to purchase high-quality child care and intervention and parental freedom to pursue career and social goals. In another household, adhering strongly to familistic values, financial advantage is used to free up parental time to incorporate a child with delays into family activities. In terms of conventional socioeconomic analyses, these two families may look the same. Knowledge about family values, and how they affect the daily activities of parents and children, however, tells us that the niches of the two families have been very differently constructed.

Thus a major implication for implementation of IFSPs is the importance of family beliefs and values. Such knowledge enhances our understanding of a family’s interpretation and response to an intervention plan. Traditionally, family needs assessment has focused on demographics and other descriptive information (marital status, family constellation, employment). In so doing, it has failed to identify the family’s perspective, or the full range of niche features.

Knowing that a mother works or is a single parent does not reflect the meaning such factors have for a child’s treatment program (Chandler, Fowler, & Lubeck, 1986). But knowing that a mother (single or otherwise) believes a handicapped child should be the focus of the family, or that the handicapped child needs protection from negative social attitudes, can influence intervention planning: It suggests priorities for treatment and provides a framework for making decisions regarding the purpose, priority, intensity, or duration of the intervention (Kaiser & Henneman, 1989).

The intervention implications of family beliefs and values can be seen in their impact on the family’s daily routine, which is an easily observable manifestation of their ecocultural niche. In the following example, a family’s socially constructed daily routine is driven primarily by their values about the future quality of life for their child who is developmentally delayed.

The T family was extremely close-knit. Jerry, the eldest of three children, was significantly delayed. At the age of 4 he had no speech.
and was not yet toilet trained. Yet his parents were already planning for his future. They imagined him in a group home by the time he was 14 or 15, because, although not looking forward to his leaving, they realized he was going to “have to lead his own life and become an adult,” and they wouldn’t be able to meet his needs forever. To this end, they started working early on skills such as keeping his room neat, emptying the trash, setting the table. They believed that this would give him more status in a group home, and thus, enhance the quality of his life. Daily activities were designed to help Jerry become more independent. Mother always encouraged him to get his own drinks and snacks; as he couldn’t pour without spilling, she made it a point to always keep a cup half full in the refrigerator. When he was 5, she stopped taking him to private occupational therapy, because she “couldn’t stand watching him string beads any more”; instead she gave him tasks at home to improve his fine motor skills, such as sorting silver, a skill she felt would be useful in a group home situation. (REACH, Case 501)

For this family, meaningful interventions for the child were those activities that could be designed within the framework of enhancing self-help skills. Their goal was to make him as independent as possible. Whereas other families might focus on preacademic skills (shapes, colors, etc.) or increasing vocabulary, these parents went out of their way to find tasks that they felt would give their child competencies to enhance the quality of his life many years down the road.

For professionals, the issues at stake are pragmatic as well as conceptual: Families are likely to be more invested in attaining intervention goals congruent with high-priority family goals (Bailey et al., 1986). They are also more likely to be able to implement those professional recommendations that fit with their values and beliefs.

**Constraints and Opportunities**

A closely related implication of integrating meanings and proactivity into ecological theories is that the valence of environmental factors—as good or bad for some family or child outcome—needs to be demonstrated with reference to the family’s own meanings. High income is good for families and better for children only in conjunction with measures of the family’s own goals and values with respect to wealth and socioeconomic status (though there is certainly a baseline of subsistence and survival that every child and parent requires). A support group that causes more concerns to parents than it provides support is of dubious positive value. Ecocultural niche features such as social support, child-care workload, siblings, and intervention services cannot be assumed to be positive or negative without knowing how these features are interpreted by families (Gallimore et al., 1989; Weisner & Gallimore, 1989). The valence attached to features is an important component of the family’s social construction of its niche.

It is not unusual for professionals to make “objective” assessments about family niches; for example, the family needs more father involvement in child care, participation in a parent support group, or opportunities for the handicapped child to have “normalizing experiences.” Ecocultural theory suggests a family service plan can maximize family functioning only if it does not ignore the loading that the family gives the niche features. Recognition of this principle of the theory is already present in concerns that interventions for young handicapped children [and families] may be “iatrogenic”; that is, that the interventions themselves may place additional stress on families (Berger & Foster, 1986; Gallagher, Beckman, & Cross, 1983; Salzinger, Antrobus, & Glick, 1980). These warnings reflect the importance of knowing the family’s loading of niche features.

By attaching positive or negative valence to events and circumstances in their niche, families “decide” which are constraints as op-
posed to resources. Circumstances that professionals might view as positive (e.g., various social support networks) may be associated by some families with heavy costs, and hence, viewed as constraints instead of resources. For example, one father in the CHILD cohort closed his shop so he could stay at home in order to eliminate a constraint. While the availability of the existing paid child care would likely be seen as a resource by professionals, the family experienced the situation as negative—because the caregiver did not provide the exercises and patterning viewed as all-important by the parents. In another case, the mother of a 3-year-old with developmental delays talked about her experiences in a community preschool:

I find it a very isolating experience, and it’s very painful for me, having nobody there. I have never felt so isolated in a school situation . . . I feel I have not connected much with the parents. I feel that they sense my child is different . . . she’s just beginning to be invited to . . . birthday parties . . . Now that I am going with her, I’m agonizing at them because I’m always watching her behaviors and wondering if people are going to sense that she’s odd. So they’re difficult for me, but I think very nice for her.” (REACH, Case 312)

Compare this perspective with that of another parent, who has written the following advice for professionals (Ziegler, 1989):

Mothers should be encouraged to ensure that their children with disabilities have as much opportunity as possible to play with other infants and young children of the same age in day care, nursery school, Sunday school, and at the local playground. Inclusion in these “normal” settings will benefit both the young child and the mother. The child will forego the stigma and stunted social and emotional growth that inevitably result from segregation from his or her age peers. The mother will be able to interact with and learn from mothers of children the same age as her child, and she, too, will escape some of the stigma and isolation of segregation. (p. 93)

As illustrated so clearly by these two excerpts, what is viewed as a resource by one parent may well be viewed as an unwanted constraint by another. The valence of a feature in a family’s life depends on its use by and meaning to families, as well as by the inherent properties of the feature (Gallimore et al., 1989); it cannot be taken for granted. Professionals need to understand the valence of niche features for individual families in order to design a family service plan that provides meaningful support. Unfortunately, most traditional measures do not reveal the valence of those features of the family’s environment that are assessed.

**HIERARCHICAL NATURE OF ECOCULTURAL NICHEs**

Ecocultural theory proposes that some domains are more salient for human adaptation than others—that there is a hierarchy of influence. The theory suggests that minimizing mortality and protecting the health of a child or parent, subsistence adaptations, and beliefs regarding appropriate moral and cultural conduct in one’s child will take precedence over other niche domains in their influence on families (LeVine, 1977). This will be particularly evident in the case of a family with a delayed child: The threat to mortality and health is very real; the threat to future subsistence competence of the child is a serious possibility, as are the changes many parents will have to make in their own work and financial lives. The threat that the child will not learn basic moral and culturally appropriate conduct is also a serious concern. Adaptation in the face of these highest-order threats will reverberate through all the niche
domains. Even where no active threat is present, mortality, subsistence, and moral-cultural training are three aspects of the eco-niche that influence the way each family constructs its daily routines; these are more powerful features of the ecocultural niche than other domains.

The following excerpt illustrates the niche hierarchy in its impact on a single family. A single mother of four young children described her flight from a rural area in the South, where she had family, and was connected to a service network. After her delayed son contracted a severe case of meningitis, she decided the services were no longer satisfactory:

Back in the south they just don’t do things. It’s bad... they look at you and if you’re not going to die in the next thirty minutes, they say you can go home... They would just shake their head and say “what a shame.” Nobody knew what to do. [She made the decision to move to California, where she had a sister she hadn’t seen for nine years.] I knew that if it cost me everything, I was going to get out of there. So I did—I made it. By the skin of my teeth. I knew that I had to—I was not going to get any help back there. They’d have put him in an institution—at that time he was just laying in a fe-tal position, like a little vegetable. It was scary. Back there it’s not a he or a she, it’s an “it.” They are afraid of handicapped kids back there. If they get too close, they might catch it like it’s something contagious. It’s pitiful, but it’s true. (REACH, Case 212)

This mother was responding to threats to mortality and health posed by inadequate medical care. She was also responding to threats to the survival of the family, given her conviction that her son would be institution-alized if she stayed in the South. Concerns in both areas overrode the very pressing subsis-tence issues she was facing. In this respect this mother behaved as parents do in all cul-
tures, according to the work that anthropolo-
gists have done on the niche of families (Le-
Vine, 1977; Weisner, 1984); she responded first to threats to mortality and family survival.

In another family, middle class, with no threats-tosubsistence issues, the family priorities are set primarily by moral-cultural training. In this case, the concern is over the child’s extremely “high hassle,” which impacts the niche in terms of domestic work-load, child care, and marital role relationships, among others (Gallimore et al., 1989).

The parents talked about life with a child like Todd. They noted that they did not have a normal family life; they could not plan family vacations. They could never take Todd into a hotel room; no one would sleep; he would keep them up all night while he ran around in circles. The mother had not been able to visit her family in Ohio for two years because she knew Todd would scream the whole four hours in the airplane. Although they were entitled to 24 hours a month respite care from a social service agency, they hadn’t been out of the house for two months; they hadn’t been away overnight together since Todd was born three years earlier. People just didn’t understand how fragile Todd was, emotionally and behaviorally. “Sometimes it’s like living on a tight rope. You don’t know if you do the wrong thing if you’re going to fall off. It’s a kind of hit and miss thing. It’s really scary when it’s your child’s whole life . . .” (REACH, Case 410)

Because niche features are hierarchical and interconnected, the parents in our cohort frequently talk of juggling medical and inter-
vention services, job schedules, standards of living, health insurance benefits, domestic workload, and parental roles. Niche features have ripple effects in so many parts of the daily routine that they are repeatedly men-
tioned—even when the subject of an inter-
view is limited to a single child, and when the interview is not, on the surface, even “on” that topic.

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The hierarchical order of niche features means they function to set priorities. This does not mean that all families have the same priorities; the features of the niche that take priority in each household vary. Thus what we present in Table 1 does not mean that all families are actively dealing with each niche level. In fact, variations among families in salient niche levels can become a major tool in designing Individual Family Service Plans.

Clearly, for a family struggling with deeper features of the niche, such as threats to mortality and survival or subsistence issues, an intensive “training” program in which the parent is encouraged to become a surrogate teacher or therapist, makes little sense. Because the surrogate role involves child care, ecocultural theory predicts it is unlikely to be effectively implemented if the family is struggling with one or more of the hierarchically superordinate features (e.g., health, subsistence).

But for families with a high-hassle child like Todd, the theory suggests that a more complex analysis is necessary. A logical part of an intervention plan for a family dealing with an exhausting child could be respite care. However, a suggestion like that has to be sensitively fitted into the family’s assessment of their niche. As long as the parents are convinced their child’s emotional health and survival are at risk, respite for themselves is not going to be a top priority.

Thus, ecocultural theory supports the view that professionals, whether or not they agree with them, must accept family statements as meaningful. What matters is what is real to the family (Seligman & Darling, 1989); in other words, the family’s social construction of their circumstances. In this sense, ecocultural theory is congruent with family system and environmental press theories: all predict that an individual’s perception of what constitutes the most important needs at a particular time is likely to assume priority status and guide that person’s behavior in certain directions (Dunst, Leet, & Trivette, 1988). What ecocultural theory adds is a specific hierarchical order in which niche features (beliefs, values, environmental presses, etc.) will take priority, and, explicit inclusion of the family’s proactive, social constructivist role.

Applied to family assessment, the proposed niche hierarchy provides a valuable context. The family who presents “the problem” as the child’s behavior may really be responding to subsistence issues: The child’s behavior may make her unacceptable to day care providers, and the mother may be in danger of losing her job, which is needed to meet the mortgage payment for a new house, which was purchased to get a safe play area requiring less parental supervision. If the mother resists adding a behavior modification program to an already crowded week, it could be quite inappropriate to treat her resistance as disinterest in actions that would assist the child. It could mean the mother considers the house and yard as more important features of the niche than a change in child-care practices.

An assessment focusing only on the child’s problems would fail to appreciate the powerful forces that are shaping and influencing the family’s perception of the child and the priorities they recognize. Regarding intervention, the way in which families organize the daily routine and the choices they make are more likely to make sense if viewed from the hierarchical framework; hence, the corresponding recommendations made by intervenors are more likely to make sense to the family.

**FAMILY-LEVEL OUTCOME**

Outcomes of early intervention have historically been assessed by changes in child cog-
The shift to family service plans raises new questions: What are appropriate family outcomes? Is there one metric that can properly be applied to all families? Is institutionalization always a bad outcome? Is sustained stimulation always a good outcome?

Ecocultural theory posits an additional set of outcomes, to be added to what we hope will be improved individual-child-focused measures, as well as traditional measures of proximal home environment. The ecocultural additions to the list of family outcomes are as follows: whether family accommodations to the child with delays are meaningful to families in terms of their beliefs and values; whether accommodations are congruent with child characteristics; and whether accommodations are sustainable for long periods of time, given the constraints and opportunities of the families (Gallimore et al., 1989; Weisner & Gallimore, 1989).

Consider the following case of the family of Todd, the high-hassle child described earlier:

Todd was one of four children. His parents ran a mom-and-pop grocery store, and placed a high premium on quality family time, although it was difficult getting everyone together. One daily period of togetherness was the dinner hour. Because Todd was very withdrawn socially, the intervenor felt the dinner hour would be an excellent opportunity for intensive family input for Todd. The parents were initially enthusiastic, because the intended outcome—a more socially appropriate Todd—would enhance the quality of “family time.” The unintended outcome was quite different, however. In addition to being socially withdrawn, Todd was very disruptive; throwing his food on the floor, leaving his seat and running around the table in circles. Thus “family time” became chaotic and stressful. The parents designed a new intervention: Todd was fed early, and during dinner, he was seated in front of the television to watch tapes of “Sesame Street,” an activity he would stay with for a good half hour. The family dinner was salvaged as “quality time” for the other members of the family, while Todd was engaged in an age-appropriate activity. (REACH, Case 401)

In this case, the family was willing to adopt the professional’s goal and try the initial intervention because it was meaningful in terms of its value of family togetherness.

However, it was neither congruent with child characteristics (high hassle) nor was it sustainable over time. In contrast, the parent’s solution was sustainable, as well as congruent with Todd’s behavior. Importantly, it was equally meaningful; “family” was redefined to exclude Todd, at least during the dinner hour, and the parents’ goals and values for quality time could be met with the other three children.

This excerpt also reveals another characteristic of ecocultural family outcomes. Accommodation to the child with developmental delays (or anything) is a process: Values and beliefs and the daily routine may be modified over time to provide a goodness of fit between family and child, defined as the “orderly interaction of the developing individual and the progressive demands of the environment” (Simeonsson, Bailey, Huntington, & Comfort, 1986, p. 82). Indeed, ecocultural theory predicts a certain amount of changing and rearranging is likely in families who are considered to have positive outcomes. From a policy perspective, the service delivery system must be sufficiently comprehensive and flexible to support accommodations and refinements made by families over time.

FROM ASSESSMENT TO INTERVENTION: AN ELUSIVE BRIDGE REVISITED

Over 10 years ago, Keogh and Kopp (1978) expressed concerns that the “data base for infant programs is limited and the theoretical...
underpinnings are often cloudy" and noted that the "rush to intervene with infants in view of lack of clearly defined conceptualizations, goals, methodologies, and adequately trained personnel is sobering" (p. 535). In those states choosing to implement PL 99-457, there will be an expansion of infant services over the next decade. The mandated family focus creates an additional layer of complexity. Are we any better off than we were in 1978?

In terms of aspiration for the field, the introduction of a perspective more oriented toward the family is clearly a step forward. But our satisfaction must be tempered by the knowledge that those states that move to implement PL 99-457 are starting with an incomplete theoretical and empirical map.

There are also social and ethical issues. Families and service providers alike have expressed concerns that the assessment and resulting planning process around PL 99-457 may be intrusive, judgmental, static, and unresponsive to family needs (Dunst, 1988; McGonigel & Garland, 1988). No theory—ecocultural or otherwise—is a guarantee against intrusiveness; for some families, any contact with professionals is viewed as intrusive. It does provide, however, some immunity against a judgmental, static, and unresponsive approach. Scarr (1985) has described the disadvantages and advantages of social constructivist science such as ecocultural theory that takes into account the perceptions, beliefs, and values of the families:

The disadvantage of this view over the current realism is that we may feel less certain of what we are doing. How can we know what is right, if there is no right? The feeling can resemble the loss of faith in a familiar and comforting religion. . . . [The advantage of this view] is that we can modify our ineffective attempts to change others' behaviors more easily, because we recognize that we may have constructed the problem inappropriately for time and space. (pp. 511-512)

Traditionally, family assessments have led to inappropriate definition of child and family problems because of the continua along which individuals and households have been classified (stress, SES, maternal education, amounts of stimulation in the environment, quality of child-caregiver interaction). What caused the mischief was the inevitable assumption that families located at the same point on these continua were homogeneous and would profit from similar interventions. Ecocultural theory tells us otherwise. It also helps us listen to families in a way that honors the spirit and intent of PL 99-457.

**REFERENCES**


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