Providing EI services through tele-intervention presents unique challenges and opportunities in regards to building a caregiver's capacity to support the child. If what you typically do during a face-to-face visit doesn't translate well to a tele-intervention visit, you may want to reflect on whether you are creating dependence or building capacity. Let's compare and contrast a few examples:

**Dependency-Creating**

- Caregiver sees tele-intervention as a huge change in service delivery and is fearful of having to be responsible for the intervention.
- The activity is created, provided, or decided by the practitioner.
- Practitioner has his/her hands on the child (literally).
- Practitioner tells the caregiver what to do.
- Learning only happens when the practitioner is present.
- Caregiver says, "We can't do this without you!"

**Capacity-Building**

- Caregiver sees tele-intervention as merely not sharing the same physical space with the practitioner and continuing to be responsible for helping the child learn.
- The activity setting for the visit is planned around what the caregiver naturally does with the child. No practitioner toy bag required on a televisit.
- Practitioner has his/her hands around the caregiver (figuratively). Tele-intervention builds the capacity of the practitioner to hone his/her coaching skills.
- Practitioner helps the caregiver reflect on what he/she knows and learn new strategies.
- Learning happens as part of everyday activities with the caregiver and other family members based on a jointly developed between visit plan.
- Caregiver says, "We got this!" Caregivers gain confidence when they see direct results from something they did.

**CALL TO ACTION!**

How will you take advantage of the what some might perceive as "limitations" of tele-intervention and use them as a catalyst to build even more capacity in the families you serve?