

Program Abstract

Overview

The Play and Learning Strategies (PALS) program is a home visiting intervention for parents of infants and toddlers that target aspects of a responsive parenting style shown to enhance children's cognitive and social development. The goal of the PALS program is to teach parents responsive parenting skills to support their child's social/emotional, cognitive, and language development. The parent learns specific behaviors that help her tune in to her child, respond in a sensitive and contingent manner, provide appropriate cognitive and language stimulation, and manage behavior and discipline in a positive, developmentally appropriate manner.

Staffing Requirement/ Training

Trained family coaches deliver the PALS program. Family coaches receive training on coaching skills, how to implement each program session, and how to use the curriculum in a flexible manner in order to meet parents' learning needs. The University of Texas Health Science Center's Children's Learning Institute offers training and certification for the PALS program. For further information on PALS training, please visit their web site at: <http://www.childrenslearninginstitute.org/our-programs/program-overview/PALS/training.aspx>

Program Materials

This EIPARDD program package contains one complete set of curriculum materials needed to implement this program including:

- Play and Learning Strategies (PALS) I & II Program Summary
- PALS I Infant Curriculum
- PALS I Infant Series DVD
- PALS II Toddler Curriculum
- PALS II Toddler Series DVD
- Getting Children Ready for Reading DVD
- Early Intervention Evidence-Based Practice Resource Guide

Program Abstract (continued)

Focus	<input checked="" type="checkbox"/> General population	<input type="checkbox"/> Psychosocial risk factors	<input checked="" type="checkbox"/> Risk factors during pregnancy or birth
	<input type="checkbox"/> Physical impairment or disadvantage	<input type="checkbox"/> Cognitive or language delay or disorder	<input type="checkbox"/> Autism spectrum disorders
Delivery	<input type="checkbox"/> Center-based <input checked="" type="checkbox"/> Home-based <input type="checkbox"/> Other		
Direct Participants	<input type="checkbox"/> Child <input type="checkbox"/> Parent <input checked="" type="checkbox"/> Child and Parent Together		
Child's Age at Start of Program	<input checked="" type="checkbox"/> Pre-Birth to 12 months (PALS I)	<input type="checkbox"/> 12 to 24 months	<input checked="" type="checkbox"/> 25 to 36 months (PALS II)
Duration	<input checked="" type="checkbox"/> Up to 3 months <input type="checkbox"/> 4 to 12 months <input type="checkbox"/> 13 to 24 months <input type="checkbox"/> 25 to 36 months <input type="checkbox"/> More than 36 months		
Evaluation Design	<p>A previous study of the PALS I program, conducted from 1997 through 2000, showed strong changes in maternal affective-emotional and cognitively responsive behaviors and infants' development. The goal of this follow-up study, conducted from 1997 to 2006 was to evaluate the effectiveness of the PALS II program during the toddler-preschool period. Mother-child pairs from the PALS I study were re-randomized into either the PALS II program or the comparison condition.</p>		

Program Abstract (continued)

Study Participants

A total of 166 mother-child pairs participated in the evaluation study. This included 80 children born term who had a gestational age at birth of greater than 36 weeks, Apgar scores greater than 8, and a normal maternal pregnancy history. In addition, the study included 86 children born at very low birth weight (VLBW) who had a gestational age at birth of less than 37 weeks, a birth weight of 3.5 lbs or less, and who ranged in severity of medical complications known to predict risk for developmental difficulties. Children were between 24 and 28 months of age at the time of recruitment.

Assessments

Mother-child pairs who participated in the study were assessed at the following four time points:

- 1) Two weeks prior to the first home visit
- 2) After the fifth home visit
- 3) A post-test after the final home visit
- 4) A follow-up assessment 3 months after the post-test

This study utilized the following assessment measures:

- 1) Videotaped observations of mother-child interactions for 15 minutes in naturalistic living room situation
- 2) Videotaped observations of mother-child interactions for 10 minutes in naturalistic toy play situation
- 3) Videotaped observations of mother-child interactions for 10 minutes in naturalistic shared book reading activity
- 4) Peabody Picture Vocabulary Test, Third Edition (PPVT-III)
- 5) Preschool Language Scale, Third Edition

Summary of Results

The study results indicate that facilitation of warm sensitivity behaviors among mothers occurred best with the PALS I intervention, while cognitively responsive behaviors were best supported with the PALS II intervention. Facilitation of behaviors that required responsiveness to the child's changing signals (i.e. contingent responsiveness and redirecting) required participation in both the PALS I and the PALS II interventions.

Program Abstract (continued)

The EIPARDD Program Package

The Play and Learning Strategies (PALS) program was selected by an Expert Panel of research scientists for inclusion in Sociometrics' *Early Intervention Program Archive to Reduce Developmental Disability (EIPARDD)*. The curriculum materials were obtained from the original developers of the program. Following acquisition of all materials, *EIPARDD* staff developed this *Program Summary*, assembled the evaluation resources, and prepared the *EIPARDD* program package. Finally, Sociometrics' archiving work was reviewed and approved by the original developer.

Contact Information

Early Intervention Program Archive to Reduce Developmental Disability
Sociometrics Corporation
www.socio.com
Tel. (650) 949-3282
Fax. (650) 949-3299
E-mail: socio@socio.com

Program Abstract (continued)

Bibliography

Dieterich, S. E., Landry, S. H., Smith, K. E., Swank, P. R., & Hebert, H. M. (2006). Impact of Community Mentors on Maternal Behaviors and Child Outcomes. *Journal of Early Intervention*, 28(2), 111 -124. doi:10.1177/105381510602800203

Guttentag, C. L., Pedrosa-Josic, C., Landry, S. H., Smith, K. E., & Swank, P. R. (2006). Individual Variability in Parenting Profiles and Predictors of Change: Effects of an Intervention with Disadvantaged Mothers. *Journal of Applied Developmental Psychology*, 27(4), 349-369.

Landry, S. H., Smith, K. E., & Swank, P. R. (2006). Responsive parenting: establishing early foundations for social, communication, and independent problem-solving skills. *Developmental Psychology*, 42(4), 627-642. doi:10.1037/0012-1649.42.4.627

Landry, S. H., Smith, K. E., Swank, P. R., & Guttentag, C. (2008). A responsive parenting intervention: the optimal timing across early childhood for impacting maternal behaviors and child outcomes. *Developmental Psychology*, 44(5), 1335-1353. doi:10.1037/a0013030

Smith, K. E., Landry, S. H., & Swank, P. R. (2005). The influence of decreased parental resources on the efficacy of a responsive parenting intervention. *Journal of Consulting and Clinical Psychology*, 73(4), 711-720. doi:10.1037/0022-006X.73.4.711