This report provides a theoretical framework for understanding different approaches to interaction intervention and uses this framework as background for considering how various cultural factors might influence families' (and providers') views of these approaches. Most research in interaction intervention has been conducted without explicit attention to cultural diversity in the samples. Current knowledge is based largely on Caucasian samples of western European derivation, particularly from the United States. Developmental studies often have confounded diversity in culture with other sources of diversity, such as ethnicity, socioeconomic status, and educational level. Differences between groups that may represent different cultural origins have often been interpreted as deficits in the non-Caucasian samples. Another interpretation of these differences is that culture may influence families' perceptions of many aspects of interaction intervention including the need for intervention, characteristics of good interactions, appropriateness of interaction as a focus for intervention, and acceptable approaches to providing intervention. Different approaches used in parent-infant interaction intervention between parents and their birth to 3-year-old children with disabilities are described, along with implications for working with individuals from culturally and linguistically diverse backgrounds. The report includes extensive references, an annotated bibliography, and a list of available resources from the CLAS Web site. (Author/SG)
Cross-Cultural Perspectives on Approaches to Parent-Infant Interaction Intervention

Jeanette A. McCollum
Tweety J. Yates

University of Illinois at Urbana-Champaign
CLUAS
Culturally & Linguistically Appropriate Services
Early Childhood Research Institute
61 Children's Research Center • 51 Gerty Drive • Champaign, IL 61820
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August 2001
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C·L·A·S
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The large majority of research in interaction intervention has been conducted without explicit attention to cultural diversity in the samples. Current knowledge is based largely on Caucasian samples of western European derivation, particularly from the United States. Developmental studies often have confounded diversity in culture with other sources of diversity such as ethnicity, socioeconomic status, and educational level. Differences between groups that may represent different cultural origins have often been interpreted as deficits in the non-Caucasian samples. Another interpretation of these differences is that culture may influence families’ perceptions of many aspects of interaction intervention including: need for intervention, characteristics of good interactions, appropriateness of interaction as a focus for intervention, and acceptable approaches to providing intervention. This report provides a theoretical framework for understanding different approaches to interaction intervention, and uses this framework as background for considering how various cultural factors might influence families’ (and providers’) views of these approaches. Different approaches used in parent-infant interaction intervention will be described, along with implications for working with individuals from culturally and linguistically diverse backgrounds.
Introduction

Interventions to change the characteristics of interaction between parents and their birth-to-three year-old children with disabilities are based on three primary bodies of knowledge. First, extensive research has documented relationships between particular characteristics of parent-child interaction and a broad array of developmental outcomes in the child; the foundations for development appear to be laid as caregivers and their infants engage in reciprocal, mutually satisfying interactions and as they adapt to one another's individuality over time (Goldberg, 1977; Sameroff & Fiese, 1990). Second, these same characteristics of interaction often differ in relation to certain characteristics of the child (e.g., disability, prematurity), parent (e.g., adolescent, clinically depressed), and environment (e.g., poverty conditions) (Barnard, Morisset & Spieker, 1993; McCollum, 1991). Such differences are thought to place the dyad at risk for less than optimal interaction, thereby also placing the child at risk for less than optimal development. Finally, research indicates that at least some of these same differences can be influenced by intervention (Barnard, 1997; Barnard, Morisset, & Spieker, 1993; McCollum, 1991; McCollum & Hemmeter, 1997). Based on this logic, professionals from many disciplines have become interested in interaction intervention as a means of influencing the developmental outcomes of young children with disabilities. Interaction intervention as a field of practice and research represents many theoretical assumptions and many hoped-for outcomes. It also encompasses prevention, promotion, and intervention perspectives.

The foundations for development appear to be laid as caregivers and their infants engage in reciprocal, mutually satisfying interactions and as they adapt to one another's individuality over time.

Professionals from many disciplines have become interested in interaction intervention as a means of influencing the developmental outcomes of young children with disabilities.
INTRODUCTION

(McLoyd, 1990). Finally, interaction intervention studies with parent-child dyads in which the child has a developmental disability have tended not to treat cultural, ethnic, or linguistic diversity as an important independent variable.

Perhaps understandably, the focus of these studies to date has been on supporting optimal development and learning in the young children with disabilities who participate in the research, irrespective of their cultural backgrounds.

Nevertheless, culture may influence families’ perceptions of many aspects of interaction intervention including: need for intervention, characteristics of good interactions, appropriateness of interaction as a focus of intervention, and acceptable approaches to providing intervention. The topic therefore merits careful attention despite the lack of information. The current paper’s intent is to provide a theoretical framework for understanding different approaches to interaction intervention and to use this framework as background for considering how various cultural factors might influence families’ and providers’ views of these different approaches.

Interaction intervention is based on recognition of the dynamic, continually evolving relationship between the child’s developing competencies and the caregiving environment (Barrera, 1991). Many aspects of early intervention are viewed most appropriately as complex systems, and parent-infant interaction intervention is no exception. As a transactional system, caregiver-child interactions represent balanced systems in which each partner presents and responds to interactive signals (Goldberg, 1977). During infancy, appropriate caregiver responses are dependent on the infant’s ability to send clear signals as well as on the caregiver’s ability to read the signals and respond accordingly (Lester, 1992). Conditions such as disability, illness, or prematurity pose special challenges to the infant and the interactive partner. These infants may be less readable as social partners or less able to respond predictably and positively to initiations from others (McCollum, 1991). These differences may violate the parents’ expectations for the roles that infants typically play in interaction. Even when the child possesses standard abilities for social interaction, a diagnosis of disability or illness may alter the parent’s perceptions of the child’s abilities and qualities (Bugental, 1987). Parents’ perception of their interactions with their infants will also be influenced by their own historical and ecological contexts (Harwood, Miller & Irizarry, 1995). Thus, differences in patterns of interaction may stem from several sources: real differences in a child’s interactive abilities, the caregiver’s perceptions of the child’s abilities, the
caregiver’s emotional response to the child with a disability, or the caregiver’s emotional sense of self as a parent. Any one of these may challenge the interactive partnership between infant and parent.

In this paper, interaction intervention is distinguished from other approaches to changing the parent-child relationship by its central focus on the parent-child dyad as a unit, in contrast to approaches directed primarily toward the child or parent (Seitz & Provence, 1990). Greenspan and Wieder (1997) proposed a hierarchy of five levels of goals and associated practices for early intervention, ranging from meeting basic, broad-based needs for safety and security to specialized therapies directed toward particular aspects of function; any or all of these levels may have importance with any particular child and family, and intervention at any level may influence outcomes across multiple levels. At the third and fourth levels, interventions are designed to match and enhance the individual regulatory and developmental characteristics of the child through the medium of interaction, with an eye toward strengthening parent-child interactions and the parent-child relationship. Interaction intervention as defined in this paper encompasses both levels. The desired outcome of interaction intervention is interactions that are reciprocal and mutually pleasurable, facilitating and representing a developmentally supportive parent-child relationship.

Evaluating the cultural appropriateness of various approaches to interaction intervention is further complicated by the dearth of efficacy information available, as well as by extreme variation among studies with regard to variables such as age at entry, length of intervention, and intensity of services. Research on interaction intervention with dyads in which the infants have developmental disabilities or delays is even more sparse and more diverse. However, it is clear that, given intervention, parents can change the characteristics and affective quality of their interactions with their infants. Further, these changes were often accompanied by concurrent changes in their children’s participation and engagement in the interactive situation (McCollum & Hemmeter, 1997).

Long-term influences on children’s development as measured by standardized instruments are less clear, although influences on some domains were reported for some interventions with some dyads. Similar but somewhat more consistently positive results have been reported for dyads in which infants have biological risk factors such as prematurity or low birth weight and dyads thought to be at...
risk due to factors in the parent or environment (Barnard, 1997; Barnard, Morisset, & Spieker, 1993).

These results, coupled with developmental knowledge about parent-child relationships as primary contexts for early development, indicate that there is every reason to pay close attention to parent-child interactions as a critically important part of early intervention. Nevertheless, the question remains: "What works for which caregivers, in which contexts, with which children, in relation to which outcomes?" (McCollum & Hemmeter, 1997).

Intervention approaches derived from different theoretical frameworks have rarely been compared within or across samples with different characteristics; rather, different frameworks have been emphasized with dyads with particular types of presenting issues (e.g., child disability, environmental risk factors). Comparisons of intervention models may be especially important when infants exhibit developmental differences, presenting unique challenges to the interactive process (McCollum & Bair, 1994). As we hope to demonstrate in this paper, a comparison of intervention models may also be particularly important when families come from varying cultural backgrounds.

The following sections will first describe different approaches used in parent-infant interaction intervention with birth-to-three year olds. All of the approaches selected for discussion are based on a transactional view of the parent-infant relationship, directed toward influencing parent-infant interaction through modifying the parent’s behavior in relation to the infant. This information will then be considered from the perspective of its implications for working with individuals from culturally diverse backgrounds. Finally, guidelines for recommended practice in interaction intervention will be examined from the perspective of this review.
Approaches to Interaction Intervention

Theoretical Framework

Different approaches to influencing the parent-child system may differ substantially from one another, based on the particular theory upon which each approach is based, and relatedly upon the historical perspective and training of the individuals who typically implement the intervention. Sameroff and Fiese (1990) outlined a 3-part framework of approaches to early intervention based on a transactional perspective. First, in a remedial approach, the purpose is to bring about change in the child. Within the context of interaction, the focus would be on changing the child's ability to participate in the interaction. For example, remediation might be directed toward the child's ability to self-regulate or to respond contingently. Second, in reeducation, intervention is directed toward the parent's ability to care for the child; with respect to interaction intervention, the goal would be to provide the parent with knowledge and skills to engage the child in optimal interaction. For instance, the parent might be provided with information about the importance of interaction, or taught new behaviors and strategies such as imitating the child or prompting new responses. Finally, in redefinition, the purpose is to change the way the parent feels about the child and/or about their relationship. In interaction intervention, caregivers might be helped to reflect on their interpretations of their infants' social and communicative cues, perhaps by drawing linkages to the parents' own relationships with others. Thus, depending on perspective, intervention that results in changes in parent-child interaction could reasonably be directed toward changing the ability of the child to interact with the parent, changing the ability of the parent to interact with the child, or changing the dyadic system.

Viewed from a transactional perspective, each approach is a legitimate one for...
brought about change in the system (Sameroff & Fiese, 1990).

Figure 1 represents a theoretical continuum that falls within the definition of interaction intervention used in this paper, in which intervention is conducted with the parent-child dyad as a unit. Several approaches to interaction intervention are portrayed: interaction coaching, reflecting a primarily behavioral orientation, and directed toward changing the interaction strategies used by parents within the interactive situation; interaction guidance, reflecting a primarily psychotherapeutic orientation toward identifying and clarifying the emotional and mental representations that parents have of their infants and of themselves as parents; and combined approaches, which draw upon theoretical assumptions and practices from both ends of the continuum. Thus, both reeducation and redefinition, as described by Sameroff and Fiese (1990), fit within the context of interaction intervention as defined in this paper, incorporating both ends of the interaction intervention continuum shown in Figure 1 into an overarching transactional perspective on early development.

**Illustrative Practices**

Table 1 provides an anchor for further exploration of similarities and differences among various approaches to interaction intervention. The primary focus of the intervention and the primary populations with whom each approach has been used are noted for each point on the continuum shown in Figure 1.

Several different ways of combining aspects of models from the two ends of the continuum are shown under combined approaches. The following sections will provide examples of models from each end of the interaction intervention continuum before describing several combined models.

As might be expected, different approaches have been emphasized to different extents with particular early intervention populations, depending on assumptions made about causal factors underlying the need for interaction intervention. In practice, few intervention models fit neatly within the confines of a single point on this continuum; rather, most models fall within the “combined” section of the interaction intervention continuum shown in Figure 1. Moreover, strategies will blur as the interventionist strives to match the perceived abilities and needs of the individual dyad (Stern-Bruschweiler & Stern, 1989). However, while adjacent sets of models have many practices and goals in common, they nevertheless represent different positions on the continuum with regard to the degree to which they are derived from their respective underlying theory and assumptions. It is important to clarify the assumptions, goals, and procedures of different approaches since different models may be more or less congruent with the values and beliefs of individuals from different cultural backgrounds and contexts (Ogbu, 1994).

**Interaction Coaching**

In interaction coaching, on the behavioral end of the continuum, parents are
taught one or more strategies that will help to achieve more responsive, sensitive, mutually pleasurable interactions with their infants, with a focus on achieving characteristics of interaction identified in the literature as related to optimal development (McCollum, 1991; McCollum & Hemmeter, 1997). For instance, in an early experimental study by Field (1982), mothers who were overly active or intrusive with their preterm infants were taught to decrease their own level of activity by remaining quiet except to imitate their infants' behaviors. A small subset of inactive mothers in the same study were helped

<table>
<thead>
<tr>
<th>Approach</th>
<th>Theoretical Orientation</th>
<th>Primary Focus</th>
<th>Primary Purpose</th>
<th>Intervention Approach</th>
</tr>
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<tbody>
<tr>
<td>I. Interaction Coaching</td>
<td>Behavioral</td>
<td>Interaction skills and characteristics</td>
<td>Structure/quality of interaction, language, cognition</td>
<td>Provide information, demonstrate, reinforce</td>
</tr>
<tr>
<td>II. Interaction Guidance</td>
<td>Psychoanalytic</td>
<td>Emotional and mental representations of attachment relationship</td>
<td>Parent-child attachment relationship</td>
<td>Discuss, interpret, comment</td>
</tr>
<tr>
<td>III. Combined Approaches</td>
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<tr>
<td>A. Coaching plus Guidance</td>
<td>Behavioral</td>
<td>Interaction skills and characteristics, interpretations of interactive cues, behavioral match and support</td>
<td>Structure/quality of interaction, general development</td>
<td>Direct teaching plus commenting and interpreting</td>
</tr>
<tr>
<td>B. Guidance plus Coaching</td>
<td>Psychoanalytic</td>
<td>Representations of attachment relationship, interpretations of child's abilities and cues</td>
<td>Parent-child relationship, general child development</td>
<td>Interpreting and discussion plus suggesting strategies</td>
</tr>
<tr>
<td>C. Eclectic</td>
<td>Behavioral and perceptional</td>
<td>Any or all of above, matched to parent-child dyad at that point in time</td>
<td>Any or all of the above</td>
<td>Any or all of above, matched to parent and/or adjusted in the moment</td>
</tr>
</tbody>
</table>
to become more active by teaching them to play games that would hold their infants' attention. In this study, two strategies, imitation and game playing, were used as a means toward achieving a more responsive, mutually enjoyable interaction.

A study by Seifer, Clark and Sameroff (1991) illustrates the use of interaction coaching with dyads in which the infant has disabilities. In this study, parent-child pairs were videotaped, and the tapes subsequently used to provide feedback to mothers about any overstimulation observed. Suggestions were also given for decreasing overstimulation. Coaching resulted in increases in maternal responsivity and decreases in overstimulation in the intervention group. Infants in the intervention group were less fussy during interaction, and also had better developmental assessment scores.

Many studies with a language development focus have used coaching to teach parents particular strategies for establishing turn-taking patterns with their children, as well as to provide conditions that encourage children to communicate (e.g., Girolametto, Verbey, & Tannock, 1994; Tannock, Girolametto, & Siegel, 1992). Other coaching studies and curricula have been directed toward dyads in which the infant has a developmental disability (e.g., Mahoney & Powell, 1988; McCollum & Stayton, 1985; Rosenberg & Robinson, 1985; Seifer, Clark & Sameroff, 1991).

The primary theoretical assumption underlying interaction coaching is that parents can learn specific strategies to use within the context of interaction with their children; changes in the parent's behavior with the infant will then elicit and reinforce compensatory changes in the child, bringing about changes in the interaction patterns of the dyad. These changes result in interactions with the structural and affective properties thought to be related to optimal development and learning. There is often an underlying assumption that these changes will also bring about a more pleasurable, mutually satisfying parent-child attachment relationship (e.g., McCollum & Stayton, 1985).

Interaction coaching fits within Sameroff and Fiese's category of "reeducation," providing parents with new information and skills for involving their children in interaction. The outcomes of interaction coaching are usually judged based on measures of frequency or appropriateness of the parent's use of these strategies and sometimes of changes in the child's participation in conjunction with the parent's use of the strategies. Longer term goals tend to be measured using standardized measures of language or general development.

**Interaction Guidance**
Whereas the emphasis of interaction coaching is on parents' acquisition of
particular interaction strategies, the emphasis in interaction guidance, on the other end of the continuum shown in Figure 1, is the parent’s mental and emotional representation of the infant (Zeanah & Barton, 1989), observed through the parent’s interactions with the infant, or derived from the parent’s interpretation of the infant’s emotions and competencies. Hence, interaction guidance fits within Sameroff and Fiese’s “redefinition” category, and is geared toward assisting the parent to represent the infant in a new and different way, thereby enabling the parent to be more attuned to the infant’s cues, needs, and abilities. The attachment relationship, rather than characteristics of interaction per se, are the primary concern, with the expectation that changes in the relationship will be mirrored by changes in parent-infant interaction (Stern-Bruschweiler & Stern, 1989) as well as providing a healthier base for future interactions.

Based on its theoretical roots in psychoanalysis, and more specifically in infant mental health and attachment theory (see Zeanah, 1993), the primary assumption in interaction guidance has been that disturbances in the interaction result from the presence of parental or familial factors that interfere with the parent’s ability to accurately represent the infant and their relationship. Hence, interaction guidance has been used most often with dyads thought to be at risk for less than optimal attachment due to factors in the mother (e.g., adolescence, depression) or with dyads demonstrating disturbed relationships (e.g., child abuse or neglect).

McDonough (1993) describes interaction guidance as a “brief psycho-therapy model that is family-problem-focused” (p. 414). In McDonough’s intervention model, an interactive play sequence between the parent and child is used as a means to assist the parent in developing greater understanding of the child. Within the context of a typical visit, a play sequence is first videotaped, and then subsequently watched by the parent and the therapist together. During viewing, the therapist elicits parent comments about the interaction, comments on positive aspects of the play, and assists parents to explore their thoughts about their own and their child’s feelings during play. The parent is led toward recognition of his or her own feelings and how these influence the interactions observed with the child. While the therapist primarily follows the parent’s lead, he or she may also raise important issues stemming from what is observed during play and during other interactions with the family (e.g., during family assessment or discussions of broader family issues). Based on the common roots that it shares with infant mental health, the primary purpose of interaction guidance is to change parents’ mental and emotional representation of the infant such that the parents can more accurately interpret their own
and their infant’s perspectives. To date, case studies have been the primary means of documenting the positive outcomes of this approach (see McDonough, 1993).

A second example of interaction guidance may be found in studies that have used parents’ observations of newborn or early infant assessments as an avenue for influencing parents’ mental and emotional representations of their infants very early in their infants’ lives, particularly in cases where the dyad may be at risk due to factors thought to influence these representations (e.g., maternal depression, history of child abuse). For instance, many studies have been reported in which the Brazelton Neonatal Assessment Scale (BNAS) or some derivation of it has been used to demonstrate the infant’s competence and interactive abilities to the parents (e.g., Belsky, 1986; Cardone & Gilkerson, 1989; Nugent & Brazelton, 1989; Widmayer & Field, 1981). A review of studies using this approach (Britt & Myers, 1994) indicates some effects on parent-infant interaction as well as on other kinds of outcomes (e.g., infant development, parent satisfaction). However, short-term effects have been more common than long-term, and effects have varied according to the particular aspect of interaction being measured (e.g., responsiveness, overall interaction scores), as well as in relation to different demographic (e.g., risk status), intervention (e.g., intensity), and measurement (e.g., time from intervention) variables. As noted by Britt and Myers, it may be too much to expect that a very early, short-term intervention will have long-lasting, multiple effects on parent-child interaction or other outcomes.

The primary intervention procedure used in interaction guidance is discussion of the infant’s interactive and responsive capacities as a means for examining the parent’s interpretation of the infant. Further, the discussion is likely to happen within the context of the parent-child interaction itself (e.g., through joint viewing of a videotape). The goal is to influence the parent’s ideas about (i.e., “working model” of) the infant and the parent-infant relationship, thereby achieving conditions that support parent-child attachment and the child’s emotional development. Unlike coaching, which assists the parent to learn particular strategies, interaction guidance is focused on changing the parent’s mental and emotional representation of the infant as a way to strengthen the attachment relationship. The primary assumption is that parents’ representations of the interaction stem from broader representations of the parent-child relationship, and must be recognized and changed in order to bring about meaningful change in the characteristics of interaction. As a concrete representation of the relationship, interaction provides the interventionist opportunities to have the parent interpret the infant, to interpret the infant to the parent, and to point out
positive aspects of what is happening between parent and child.

Combination Models
Most approaches to interaction intervention combine aspects of interaction coaching and interaction guidance, and in fact form a mini-continuum within Figure 1. For the purposes of this discussion, we will divide these models into three sets. The first two to be discussed, while combining aspects of both ends of the theoretical continuum, clearly lean toward one or the other end. The last approach to be discussed is more eclectic. Models that fall at this point on the continuum tend to take a more pragmatic view, drawing assumptions and practices relatively equally from both ends, depending on the individual parent-child dyad.

Interaction Coaching Plus Guidance
Falling toward the behavioral end of the combined approaches, this point on the continuum, like coaching, emphasizes helping parents learn strategies to support their infants' participation in a positive, reciprocal interaction. However, it also incorporates aspects of interaction guidance in its emphasis on assisting the parent to observe, interpret, and respond to the infant's cues. Thus, intervention content and approaches may be more individually matched to the characteristics of the specific dyad, with the focus on the dyadic match rather than on specific strategies (e.g., McCollum & Stayton, 1985). Nevertheless, the meaning of "interpretation" in this set of approaches differs significantly from its meaning in interaction guidance, where the emphasis is on interpretation of the parent's mental and emotional representation of the infant. The assumption in this more behavioral orientation is that it is primarily differences in readability of the child and/or a lack of a repertoire of behavioral strategies in the parent that interfere with the interaction, rather than factors that are internal to the parent. Hence, as in interaction coaching, the focus is on behavior. However, in common with interaction guidance, there is more focus on assisting the parent to become better attuned to the child's abilities and cues, thereby achieving more accurate interpretations of the infant's cognitive and emotional experience.

Many of the intervention models that fall at this point on the continuum have been developed with particular characteristics of children with developmental disabilities (e.g., Barrera, 1991; McCollum, 1984; McCollum & Stayton, 1985) or biological risk factors such as prematurity (e.g., Barnard, Hammond, Sumner et al, 1987; Barrera, Rosenbaum & Cunningham, 1986; Bromwich & Parmelee, 1979) in mind. As in interaction coaching, the intervention is undertaken largely as a means toward developing structural and affective interaction qualities that will foster the development of age-appropriate competencies in the infant. Procedures used at this point of the continuum also tend to...
be similar to those used in interaction coaching (e.g., modeling, demonstration), with somewhat more emphasis on procedures such as joint observation and interpretation of the infant’s behavioral cues. Thus, combined approaches at this end of the central part of the continuum represent primarily a reeducation orientation, but also incorporate strategies that focus toward assisting the parent to redefine the infant. In the case of infants with disabilities, the need for redefinition is based on the assumption that the infant’s disability may result in some lack of clarity that makes an interactive partnership more difficult to establish.

**Interaction Guidance Plus Coaching**

A second set of combined approaches, falling toward the psychoanalytic end of the continuum, has theoretical underpinnings and many practices in common with interaction guidance, but also incorporate elements of interaction coaching. In accord with a theoretical orientation that places the source of interference with optimal interaction in the parent rather than the infant, this set of approaches emphasizes parents’ mental and emotional representation of their infants. However, in accord with more behavioral models, this is often addressed by assisting the parent to focus on the behavioral capabilities of their infants as interactive partners, or on their infants’ responses to interaction overtures. The underlying assumption is that the parent’s representation of the infant will be influenced by achieving a more accurate interpretation of the infant’s abilities and responses within the interactive context, thereby influencing the development of a healthier attachment relationship.

Approaches falling within this part of the continuum have been used most extensively with parents considered to be at risk for environmental reasons, where lack of knowledge of infant development, as well as personal and familial context and history, may interfere with the parent’s ability to interpret the infant’s cues (e.g., Muir, 1992). Fraiberg’s work with blind infants and their parents provides a very clear illustration of how this theoretical orientation also addresses the needs of dyads in which the infant has a disability (Fraiberg, 1974). The theoretical assumptions underlying this work place it toward the psychoanalytic end of the continuum; emphasis is placed on the parent’s representation of self as parent, with the infant serving as a vehicle for exploring this representation. However, parents are also assisted in interpreting and responding to the communicative differences that their blind infants bring to the interactive situation. Fraiberg’s case studies of blind infants with their parents provide clear evidence that assisting parents to interpret and adapt to their infants’ abilities and differences, in addition to assisting parents to
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explore their mental and emotional representations of the infants and of themselves as parents of these infants, can lead to the parents being able to establish more optimal interactive contexts for their infants' development.

A carefully controlled intervention study conducted in the Netherlands (van den Boom, 1994) further illustrates the potential of conducting interaction coaching within a theoretical orientation derived from an attachment framework. In this study, dyads were selected based both on low socioeconomic status and on identification of the infants as irritable. Intervention was directed toward teaching the mother behavioral skills for monitoring, interpreting, and responding to their infants. Results indicated differences in intervention and control groups not only on direct measures of interaction behaviors, but also in attachment and in infant perseverance, attention span, and exploration during play.

Thus, in contrast to more purely psychoanalytic approaches, the assumption here is that the parent needs specific knowledge and skills in order to engage the infant in pleasurable, reciprocal interaction; in this set of approaches, this process is viewed as a means to more accurate parental interpretation and representation of the infant. To achieve this, the intervention process often incorporates asking the parent to try certain strategies with the infant (as in coaching), so that the infant's responsiveness to the parent will be highlighted. Hence, while the primary goal is to redefine the infant in the parent's eyes, and to thereby facilitate attachment, these approaches also include elements of reeducation in directly teaching parents not only about their infants' abilities, but in assisting them to use strategies that highlight these abilities. Because emotional development is expected to be manifested in more general development, more general developmental competence has been used as the most common infant measure.

Eclectic Approaches
Several models of interaction intervention, while not explicitly recommending a combined theoretical orientation, have taken a more pragmatic orientation toward combining assumptions and/or intervention procedures from both ends of the continuum, depending on the interventionist's judgment of what will best match the needs of the individual parent-child dyad. For instance, in an intervention model developed by Bromwich (1981; 1990), intervention targets are arranged in a hierarchy in which the parent-child relationship is viewed as a foundation for achieving developmentally supportive interactions. In this model, the latter become an explicit target of intervention only when a solid foundational relationship is achieved. A somewhat different approach is represented in the work of McCollum and Yates (1994), in which intervention strategies from both ends of the continuum may be used from moment to moment in response to what is happening in the interaction on a moment-to-moment basis, as well as on the interventionist's knowledge of the child and of the parent. The assumption
in this model is that, while different parents may benefit from different types of strategies, all parents will gain from strategies that support their knowledge of their infant’s developing abilities as well as strategies that support their own interaction skills.

While different parents may benefit from different types of strategies, all parents will gain from strategies that support their knowledge of their infant’s developing abilities as well as strategies that support their own interaction skills. Both of these models combine strategies that may be beneficial in adapting to the many individual differences among parent-infant dyads, and both combine elements of redefinition and reeducation. However, in the former, reeducation goals and strategies follow from redefinition goals and strategies, whereas in the latter these shift from moment to moment as well as from dyad to dyad.

Combined models, like the models at either end of the continuum, have been subjected to little systematic research. Nevertheless, given the extreme individual variation that children with disabilities bring to the interaction context, as well as individual variation in how parents respond emotionally and instrumentally to children’s disabilities, combination models, if thoughtfully applied, may offer the best chance of matching each dyad’s strengths, needs, and preferences.

**Summary**

The continuum shown in Figure 1 provides a framework for examining approaches to interaction intervention with respect to their primary theoretical orientation. Each of the approaches, including each different combination within the central portion of the continuum, represents different emphases with respect to the source of differences in interaction as well as the types of changes to be essential in achieving more optimal interaction. Based on these differences, content varies across the continuum from the acquisition of strategies and skills at the behavioral end to changes in the parent’s mental and emotional representation of the infant at the psychoanalytic end. Similarly, intervention processes vary from direct teaching of skills and strategies, to examination and clarification of internal representations. Based on case description and a limited amount of empirical data, each approach appears to have value for some dyads with respect to some outcomes.

Even this brief overview of approaches representing two different theoretical orientations clearly demonstrates that differences in intervention strategy along this continuum are primarily differences in emphasis. It is also apparent that the ability to combine theoretical orientations may be important in conducting work with dyads in which infants have developmental disabilities. It appears that a more explicit recognition and combination of theoretical orientations might also be beneficial in responding to the many
potential individual differences among dyads in which the infant has a developmental disability. Neither end of the continuum adequately addresses the needs that are emphasized at the other; consequently, approaches at each end make assumptions about parents' needs that may not accurately represent the dyad. Clearly, infants with disabilities bring real differences to the interactive process. In addition, however, interactions may be influenced by parents' perceptions of their role as parents, both in general and in relation to an infant with a disability. Further, each of these may be influenced by the parent's own historical and current life situation. Thus, different cultural perspectives may have significant implications at every point along this continuum.

As shown in Table 2, cultural (and other forms of) diversity can be represented in several ways in studies of interaction intervention. One way to pay attention to diversity (Model 1) is to consciously exclude individuals with certain characteristics from the sample to whom the intervention is applied, with the express purpose of eliminating a source of variance that is difficult to control. This approach acknowledges that different characteristics of the population may influence the outcomes of the interaction in unknown ways; nevertheless, generalizability to anyone not having the same characteristics as the individuals in the study is not warranted. A second possibility (Model 2) is that individuals with diverse characteristics are part of the larger sample used in the particular study; information may be provided about the characteristics of the sample, but without separate analyses on sub-group differences. Here, individuals from different cultural/ethnic groups are presumed to fit within the same theoretical framework. In Model 3, individuals who vary with regard to some particular characteristic such as ethnicity, culture, or language may be specifically selected for intervention because potential differences in interaction have already been identified; thus, all individuals from a particular socioeconomic group might be provided with intervention because developmental research has indicated that they are at risk for less than optimal interactions. If the intervention works, then generalization to others with similar characteristics may be warranted.

In Model 4, results for sub-groups of individuals within a larger study, varying from one another on some characteristic such as ethnicity or race, may be compared post hoc in order to determine whether they responded in the same way to the intervention. For instance, Spiker, Ferguson and Brooks-Gunn (1993), analyzing the parent-child interaction results from a comprehensive early intervention program for low birth weight, premature infants (the Infant Health and Development Program), reported that maternal race and maternal education influenced maternal and dyadic ratings independently of the
TABLE 2: MODELS ... PARENT-INFANT INTERACTION INTERVENTION STUDIES

Models for Representing Diversity in Parent-Infant Interaction Intervention Studies

<table>
<thead>
<tr>
<th>Model</th>
<th>Characteristics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excluded from Sample</td>
<td>Individuals included in sample are limited to those having particular characteristics in order to control for possible effects of diversity on parent-infant interaction</td>
</tr>
<tr>
<td>Included as Part of Larger Sample</td>
<td>Individuals with diverse characteristics are included within the total sample as representative of the total population, but are not separated out for analysis</td>
</tr>
<tr>
<td>Selected for Intervention Based on Diversity</td>
<td>Individuals with particular characteristics are selected for intervention because those characteristics are believed to place them at risk for less than optimal parent-infant interaction</td>
</tr>
<tr>
<td>Post-hoc Comparison</td>
<td>Individuals included within the total sample are separated on a post-hoc basis in order to determine whether the interaction intervention had differential effects on individuals with different characteristics</td>
</tr>
<tr>
<td>Comparative Samples</td>
<td>Individuals are selected to represent different cultural/linguistic backgrounds, with the intent of comparing the efficacy of the interaction intervention across groups from different backgrounds</td>
</tr>
</tbody>
</table>

As noted in the introduction to this paper, most of the knowledge on which different approaches to interaction intervention are based stem from work with samples of western-European origin. Given the small body of literature and the range of variation in both approaches and outcomes, it is not surprising that questions of cultural and linguistic diversity and their relation to variations in interaction intervention have received almost no attention. Nevertheless, a major complicating
factor in evaluating the extent to which the approaches to interaction intervention apply across individuals from different cultural backgrounds is that no research of these approaches has directly addressed this question.

Although all five models are appropriate for addressing particular questions and making particular kinds of generalizations, only Model 5 allows conclusions about the relative effectiveness of any particular approach across groups. More importantly with respect to the issues raised in this paper, even this model does not address the question of appropriateness: it is quite possible that desired outcomes, as defined by the interventionist, could be obtained even when neither the outcome nor the approach has validity for a particular group (or for some individuals within the group).

To obtain an answer to this question, participants in the intervention must be directly asked to respond to it. If they are not, then regardless of the research model, assumptions are being made about the appropriateness and relevance of the intervention model for individuals for whom these assumptions may not hold true. As noted previously, the question in interaction intervention (as in other areas of early intervention, see Guralnick, 1997) has been, “Does it work?,” with little consideration of “with whom?” A further question from the perspective of cultural appropriateness is, “What meaning does this have for the individual in relation to his or her own world view?” Reasonable outcomes of interaction intervention include child and parent behavior, the parent’s perception of self and of the child, and the parent’s perception of the intervention. There are many reasons to expect that any one or more of these three outcomes of interaction intervention might vary across cultures.
Applying a Critical Cultural Lens to Interaction Intervention

Culture is defined here as a shared approach to life, based on common social norms, beliefs, and values that govern the roles, communication patterns, and affective styles of those who identify with the culture (Betancourt & Lopez, 1993). Culture may lie within or across ethnic (i.e., country of origin) or racial (i.e., common biological lineage) lines or may refer to affiliation with a subgroup within a larger cultural group. The validity of applying any approach across cultures will require much research or at least careful examination of all aspects of each model from different cultural perspectives. These tasks are clearly beyond the scope of this paper. However, some insight as to cross-cultural applicability may be gained by examining selected culturally situated factors that are closely related. One such factor is the perspectives that individuals from different cultures bring to the role of parenting, and by implication to their interactions with infants.

The next section will illustrate how even a small amount of knowledge of cultural views on parenting can bring new understanding to evaluating the cross-cultural appropriateness of interaction intervention.

At least two aspects of parent-child interaction intervention deserve special attention from within the context of a cultural perspective on parenting: the content of the intervention, or the aspects of interaction that the intervention is concerned toward, and the intervention process, including the procedures used to bring about the desired change in the interaction as well as the physical and social contexts in which intervention occurs.

Content

The content of interaction intervention undertaken primarily to foster the infant’s development is drawn largely from developmental research linking particular qualities of early interactions and early relationships to later developmental outcomes across multiple domains. For infants with developmental disabilities, this content is further supported by research demonstrating that these same characteristics of interaction often differ in these dyads. The assumption is that interaction intervention directed toward these characteristics, whether they be behaviors or representations, will provide a more appropriate developmental environment for the infant. However, McCollum and McBride’s (1998)
I
Parent-Infant Interaction

review of issues related to the content of parent-infant interaction rating scales yielded two important questions with respect to cultural appropriateness that are also germane here: whether similar developmental goals (e.g., psychological traits, developmental abilities) are valued equally across cultures; and whether, given a similar developmental goal, the same parenting practices are necessarily needed to achieve it. Cross-cultural research indicates that the answers to neither of these questions is an unqualified “yes.”

The concept of directiveness serves as a case in point. In Western culture, parental directiveness has been linked to authoritarianism, a trait that has been associated with less than optimal emotional and social development. Within the context of parent-infant interaction, directiveness is interpreted as being contradictory to the ability to establish qualities such as turn-taking and to the child’s ability to take the initiative in the interaction (Marfo, 1991), potentially hindering emotional, communicative and cognitive competence. Even a cursory examination of parent-child interaction research from another culture places these linkages in a different light. As described by Chao (1990), in Chinese society directiveness, or “training,” has positive connotations, and is an important part of the mothering role in preparing the child to become a part of a culture that values interdependence over independence. Because of this cultural context, and because good parenting is defined in this way, training also has positive connotations to the child. Hence, differences in interaction among caregivers from different cultures may point to different conclusions. In Chao’s example, different behaviors appear to be related to optimal development, defined by the culture in this case as different goals. In addition, it is possible that, across cultures, different approaches to parenting may be equally related to the same developmental goals. For instance, while directiveness may be negatively related to academic achievement in a cultural context that values independence, it may be positively related to the same outcome in a cultural context that values interdependence (Chao, 1990).

The implications of cross-cultural research for selecting appropriate content for parent-infant interaction intervention are enormous. First, the cultural goals for parent-infant interaction may differ across cultures (Chen & McCollum, 2000; Greenfield, 1994; Harkness & Super, 1995; McCollum, Ree, & Chen, 2000); consequently, “good” parenting and parent-child interaction may be defined quite differently. Adding a developmental disability further complicates this picture. Perceptions of infancy, of parenting goals, and of appropriate parenting behavior when the infant has a disability may differ from more normative ones, and undoubtedly differ across cultures. Intervention directed toward parents’ interactions with their infants, even when viewed as appropriate by parents, may have different content implications across cultures. Since most of what we know about interaction intervention is based on developmental or intervention research from Western societies, or is
APPLYING A CRITICAL CULTURAL LENS TO INTERACTION INTERVENTION

based on assumptions derived from Western values, the danger is that interaction intervention may either emphasize what is not valued by or relevant to the family, or may not emphasize what is valued (McCollum & McBride, 1998).

The answers to this kind of question can only be derived from comparative research which directly addresses the cultural validity of the intervention content. As researchers continue to broaden their scope of attention and their openness to non-Western views of the world, interventionists must seek to understand the meaning of particular outcomes and goals to families with different world views. In practicing intervention, this will be necessary at the individual family level as well.

**Intervention Process**

The process of interaction intervention relates to the particular practices and strategies used by the interventionist in addressing the goals of the intervention. As illustrated above, interaction coaching relies primarily on direct teaching, using strategies such as providing information, demonstration, and guided practice, whereas interaction guidance relies more heavily on techniques such as reflection, interpretation of internal representations, and reframing. Intervention processes used at each end of the continuum are directed toward specific kinds of outcomes. As illustrated above, these outcomes may be differentially relevant and acceptable across cultural groups. It therefore might be expected that the processes would be perceived differently across groups as well.

Interaction intervention research, like other early intervention research, lacks this level of specificity (McCollum & Hemmeter, 1997). In accord with the five research models outlined above, answers to this question would have to be addressed directly, using direct comparisons of effectiveness of different models across samples representing various cultural perspectives, as well as direct comparisons of different groups’ evaluations of the appropriateness of these processes. While this has not been done, other areas of the literature can be drawn upon to inform our understanding of how cultural background might influence perceptions of the process of interaction intervention. Two areas which may have particular relevance to interaction intervention include the cultural contexts of infants’ interactions with their primary caregivers, and cultural views of helping relationships.

For interaction intervention to influence developmental outcome, contexts of intervention should mirror the conditions under which infants are engaged in interaction.
Parent-Infant Interaction

In some cultural groups, interaction with the infant in any one or more of these three types of situations may not be viewed as the responsibility of the biological parent; rather, this role may fall to other close adults or to siblings. Parent-infant play, the most often-studied type of early interaction, and the most often used as the context of interaction intervention, may vary considerably across cultures, or may vary in relation to gender or to the age of the child. Even one-to-one play between infant and adult may be less meaningful in some cultures than in others.

All of the intervention approaches described above are similar in their emphasis on the mother-child dyad, and on the use of parent-child play as the setting for intervention. Viewed from the perspective of the samples on whom the developmental research underlying these procedures was conducted, there appears to be a meaningful relationship between these contexts and children's development. However, when interaction is situated in different contexts, or is viewed differently for some children, then its relationship to development undoubtedly differs as well (McCollum & McBride, 1998); the relevance of uniformly using these contexts for intervention is therefore also questionable.

Perhaps the most important part of how interventions are delivered is the relationship between interventionist and parent, and the roles taken by each of these individuals within the intervention (Kalmanson & Seligman, 1992). Each of the interaction intervention approaches described above is based on this relationship. However, interventionists and parents both approach the intervention context from the perspective of their own personal and cultural histories. Views of appropriate helping relationships, including the respective roles of interventionist and family, may differ in accord with differing views of the self (Markus & Kitayama, 1991). For instance, the degree to which a parent considers a decision-making or a direct service role appropriate may vary in relation to cultural views of professional expertise and responsibilities.

Similarly, the extent to which it is considered appropriate for family members other than parents to be involved in the early intervention process may vary in relation to perceptions of parenting held in different cultures. Important concepts underlying a family-centered approach, currently emphasized in early intervention, may be unfamiliar and uncomfortable to some families based on their views of appropriate roles and responsibilities for themselves and service providers, as well as on their own historical experience with service providers from backgrounds dissimilar to their own (Chen, 1997). The effectiveness of family-centered models of service delivery (Trivette, Dunst & Hamby, 1996) have yet to be validated with
families from diverse cultural and socioeconomic backgrounds (Chen, 1997).

Guralnick’s (1989) view that the degree to which parents are supported in their own development as competent and confident caregivers may be a primary factor determining the effectiveness of early intervention. This would guide us to look for processes that not only achieve change in the interaction, but that foster a sense of self-efficacy in the caregiver. However, culture determines perceptions of self as parent by defining parental responsibilities to the child and family (and vice versa), and by defining appropriate roles for various types of individuals outside of the family.

Parent-infant interaction is a very private matter, grounded in each culture’s views of the parenting. Views of disability and illness may also differ considerably in relation to culture (Reynolds & Ingstad, 1995), and little is known about how this interacts with views of appropriate parenting. The characteristics of effective intervention may themselves differ across cultures, related to different views of appropriate parent-professional relationships (Chen, 1997) and how intervention should be conducted. It is quite possible that there are important inter-group differences in what brings about change, in what change is appropriate, and in what supports and enhances parental efficacy. Hence, another part of the specificity question stated above might be, “and why?” since mechanisms explaining intervention success (or lack of success) may well differ across cultural groups.

**Summary**

Appropriate contents, processes, and contexts of interaction intervention are culturally defined. Parents participating in intervention organize their behavior in accord with their perceptions of what is appropriate, given their own culture and personal history, as well as their current ecologies. Parent-infant interaction is a very private matter, grounded in each culture’s views of the parenting.

Culture determines perceptions of self as parent by defining parental responsibilities to the child and family (and vice versa), and by defining appropriate roles for various types of individuals outside of the family.
Conclusions and Implications

Despite many complicating issues, the logic underlying interaction intervention with dyads in which the infants have disabilities is compelling. Not only is it clear that for some populations, under some conditions, interaction does bring about the desired changes in the characteristics of the interaction, but it is also clear that for some populations, under some conditions, longer-term outcomes are obtained as well. Interaction intervention makes theoretical sense from both developmental and family systems perspectives. Based on analyses of the results of more comprehensive early intervention studies, some researchers have speculated that changes in the parent-infant interaction system, and in parents’ views of themselves as effective caregivers, may be the primary mechanisms that account for positive developmental outcomes from early intervention (McCollum, 1991; McCollum & Hemmeter, 1997; Spiker, Ferguson, & Brooks-Gunn, 1993). Longer-term success is likely to accrue when parents become more proficient in observing and interpreting their infants’ developmental agendas, and when they gain confidence in their own ability to engage and support their infants (Seitz & Provence, 1990). Based on this logic as well as on the compelling logic of a transactional systems perspective on early interaction (Sameroff & Chandler, 1975), professionals from many disciplines have rightly become interested in interaction intervention. Nevertheless, this field of study represents many theoretical assumptions and many hoped-for outcomes.

An optimal set of criteria for planning and evaluating interaction intervention would be grounded in demonstrated results across a wide variety of conditions and populations; would be theoretically linked to developmental processes within the context of family; and would be family-centered, reflecting the family’s views of what is appropriate with regard to content, process, and context. This grounding would require studies across many cultural/linguistic groups, and in relation to important sources of variation within groups. The reality is that interaction intervention, when applied to individuals from different cultural backgrounds, has been applied without consideration to the potential influences that these backgrounds may have on interpreting the results of the intervention. These studies have not been done. The reality is that interaction intervention, when applied to individuals from different cultural backgrounds, has been applied without consideration to the potential influences that these backgrounds may have on interpreting the results of the intervention. Developmental studies have begun to attend to similarities and differences in child rearing practices across cultures, including similarities and differences in interaction and attachment patterns (e.g.,
Grossman & Grossman, 1990; Fracasso, Busch-Rossnagel, & Fisher, 1993); these studies must be extended to include children with disabilities. In addition, intervention studies must begin to recognize and systematically seek to understand how intervention practices interact with these and other cultural values and practices.

Despite these gaps in knowledge, it is possible to draw from what is available some general criteria for evaluating models of interaction intervention. Table 3 provides a list of suggested minimum criteria for evaluating interaction intervention approaches from a cultural perspective. The guidelines shown ask four primary types of questions: first, is the practice consistent with theory with respect to infant development, the infant as part of a family system, and a systems perspective on early intervention; second, is efficacy information available, and has it addressed questions of specificity with regard to who receives which approach, in what kind of context, how, and with respect to which outcomes; third, is the content (focus) of the intervention culturally appropriate, relevant, and inclusive; and fourth, do the process and context of intervention appear to be culturally and individually appropriate for this family. Policy makers at the national and state levels and professional organizations such as the Division for Early Childhood and the National Association for the Education of Young Children should keep such criteria in mind as they set or evaluate recommendations for practice.

Across cultures, early interactions with caregivers (parents and others) serve as the child's window to development and to the world. We know that factors in child, caregiver or environment may place these interactions at risk. Normalizing interactions in order to achieve particular characteristics of interaction may lay the groundwork for influencing many aspects of development. However, to achieve this goal, early interventionists must learn what is viewed as "normal" in the culture with which the family affiliates (Ogbu, 1994), so that standards of comparison are relevant to the individual. It is imperative to guard against using cultural labels as criteria for making decisions about intervention.

Many factors impact a family’s beliefs and values in addition to beliefs and values stemming from culture. Drawing the line between making this kind of judgment and imposing one’s own cultural perspectives is a fine line indeed. Given the many unknown ways in which culture may interact with any one approach to interaction intervention, interventionists must become sensitive to how differing views of the world, including their own, influence views of parenting, parent-child interaction, and helping relationships. The current best
# TABLE 3: CRITERIA FOR EVALUATING MODELS AND MATERIALS

## Criteria for Evaluating Models and Materials Related to Interaction Intervention

<table>
<thead>
<tr>
<th>Focus</th>
<th>Criterion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theoretical Grounding</td>
<td>1. The approach reflects current theories of child development (e.g., integrated development)</td>
</tr>
<tr>
<td></td>
<td>2. The approach reflects current theories of families (e.g., family systems theory)</td>
</tr>
<tr>
<td></td>
<td>3. The approach reflects current theories of service delivery (e.g., systems theory)</td>
</tr>
<tr>
<td>Model Effectiveness</td>
<td>1. The approach has been shown to be effective for accomplishing important short- and/or long-term outcomes.</td>
</tr>
<tr>
<td></td>
<td>2. The approach has been examined for effectiveness with different populations, in different contexts, for different outcomes.</td>
</tr>
<tr>
<td>Developmental Relevance</td>
<td>1. The approach reflects research on characteristics of early interactions that are related to children's development.</td>
</tr>
<tr>
<td></td>
<td>2. The approach is grounded in everyday, contextually relevant caregiver-child routines.</td>
</tr>
<tr>
<td></td>
<td>3. The approach emphasizes mutual adaptation between infant and caregiver as a way of highlighting what each individual member of the dyad brings to the interaction.</td>
</tr>
<tr>
<td></td>
<td>4. The approach draws upon dyad-specific content and uses dyad-specific procedures, drawing upon the preferences and abilities of the particular dyad.</td>
</tr>
<tr>
<td></td>
<td>5. The approach respects the parenting role, emphasizing the development of self-efficacy in the caregiver.</td>
</tr>
<tr>
<td>Cultural and Individual Contexts</td>
<td>1. The goals and focus of this approach: (a) have been validated across cultural groups with regard to relevance, appropriateness, and inclusiveness; and/or (b) are consistent with what is known about the cultural group with which the family(ies) identify.</td>
</tr>
<tr>
<td></td>
<td>2. The procedures/contexts used in this approach: (a) have been validated across cultural groups with respect to appropriateness and desirability; and/or (b) are consistent with what is known about the cultural group with which the family(ies) identify.</td>
</tr>
<tr>
<td></td>
<td>3. The content, processes and contexts of intervention are selected by, and are meaningful to, each family with whom it is used.</td>
</tr>
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</table>

The approach to interaction intervention, and perhaps the continuing best approach, is to seek to learn from the family and from others in the community... influences that different views of the world may bring to bear on any one approach to practice, including any one approach to interaction intervention.
References
References


REFERENCES


REFERENCES


Annotated Bibliographies

**Summary**

Chen and McCollum (2000) examine benefits of parent-infant interactions for child social competence development and the maternal roles to achieve these benefits during parent-infant interactions. They interviewed 13 Taiwanese mothers of 12-month-olds in Taiwan regarding two situations: (a) interactions with objects and (b) interactions without objects.

From the analysis of the interview with the mothers, Chen and McCollum found that two components of social competence, the emotional and social components, were salient from the Taiwanese parent-child interactions. For the emotional benefit, Chen and McCollum state that the mothers emphasized having good relationships with others, and mothers considered that parent-child interactions may enhance their relationship with their child and serve as a basis for their children's relations with others. For the social component, they mention that taking appropriate social roles and having good social manners and qualities were important to the mothers. In addition, they found that the mothers perceived being teachers and caregivers as important maternal roles to help their children's social competence.

From the results of their study, Chen and McCollum (2000) suggest Taiwanese mothers' perceptions of the social and emotional components of social competence are consistent with Taiwanese cultural values, which emphasize harmonious relationships. In the discussion of their study, Chen and McCollum state that there has been limited research on interactions of mothers and their infants from backgrounds other than European-American families. Given that parent-child interaction provides primary opportunities for children's socialization into their cultures, parents' perceptions regarding social competence development and maternal roles in different cultural contexts are important to consider. Moreover, as early intervention uses parent-child interaction to facilitate children's development, parents' perceptions and beliefs across cultures are important.

Summary

McCollum and McBride (1997) state that developmental research has emphasized the significant impact of parent-child interaction on child optimal developmental outcomes. Thus parent-child interactions have been the focus in early intervention practice. In order to lead to the optimal development of children, researchers and early interventionists have described mutual enjoyment, sensitivity and responsiveness to the infant's signal, joint attention, and repetitive structures as characteristics of interactions that promote child development. In addition, a number of rating scales assessing parent-child interaction have been developed to help research and intervention practices. However, McCollum and McBride state that most rating scales have been developed based on values of European-American families. McCollum and McBride raise issues of different cultural perspectives on parent-infant interaction and cultural validity of interaction rating scales.

In terms of cultural differences in parent-child interaction, McCollum and McBride (1997) discuss two factors that influence parent-child interaction: (a) different cultural goals for development from parent-child interactions, and (b) beliefs about the nature of development in infancy. For each factor, the authors provide a detailed discussion how the two factors lead to different behaviors during parent-child interaction by providing examples such as independence vs. interdependence, and survival, subsistence, and achievement. Furthermore, the authors discuss the cultural validity of interaction rating scales in terms of instrument validity including construct validity, content validity, predictive validity and the validity of the measurement context. To help researchers and early interventionists understand how parent-child interactions across different cultures facilitate children's optimal development, McCollum and McBride (1997) provide suggestions for implications and practices.

Summary

This chapter reviews issues and trends related to parenting in different cultures. In their review, Harkness and Super (1995) provide a detailed overview of research on parenting and culture, with a historical review of developments from anthropological and developmental psychology perspectives. First, they describe classical ethnographic studies that documented informal and formal cultural practices that influence parenting behavior in different cultures. The second section provides a developmental psychology perspective that focuses on the relationship among early experience, personality, parenting, and culture. In the following section, Harkness and Super describe cross-cultural studies of culture and parenting to search for general principles in each culture in terms of children’s development, promoting culture-specific patterns of personality such as anxieties, conflicts, and defensive systems, which are expressed in art, rituals, religions and other belief systems.

Harkness and Super (1995), in the fourth section, review The Six Culture study, which is the first systematic observational study investigating parents and children in different cultures. From the review of The Six Culture study, they state that the study documents the influence of children’s cultural environments and cultural complexity on children’s social behavior. The final part of the historical review of parenting and culture describes different theoretical perspectives influenced by interaction with developmental psychology, systems theory, and cognitive or interpretive schemes. According to their discussion, the different theoretical approaches consider settings for parents and children, activities, the meanings of settings and activities, parenting as the result of cultural experiences of parents, and characteristics of individual children as important factors in different parenting practices in different cultures. From the extended historical review of research on parenting and culture, Harkness and Super conclude that studies have applied two major approaches: (a) a comparison view that tries to understand the uniqueness of individual culture on the other, and (b) an approach that examines different patterns of each culture and parenting as a cultural meaning system. For future studies to bring progress in the field of culture and parenting, they suggest integrating these two approaches.

Summary

McLoyd (1990) presents and discusses issues related to the influences of poverty and parent-child interaction, focusing on African-American families. In this article, she provides an extended review of studies of economic difficulties that African-American families have experienced and their influence on socioemotional development of African-American children. The first issue, she argues, is the dynamics of poverty and economic decline among African American children. This decline features: (a) African-American families' unemployment status because of the continuing change of the structure of society, (b) low wages of African-American employees, and (c) an increasing number of female-headed households.

The psychological and emotional states of parents who experience economic hardship is the next issue. According to McLoyd, economic hardship adversely impacts marital bonds and mental health, as well as leading to an increased vulnerability to other stressors. Especially, studies of the relationship between race and mental health have documented that African-American families tend to have more susceptibility than other groups to stress following negative life events.

The next issue that McLoyd (1990) discusses is the impact of economic hardship on parent-child interaction. For this issue, she reviews studies of different parenting behaviors in the context of poverty versus affluence, and in the context of economic decline versus that of economic stability. She focuses on mother-child and father-child interaction and child abuse. In addition, studies have indicated different parenting styles between European-American and African-American families due to the results of the combination of cultural values and beliefs and poverty and economic loss.

The final issue McLoyd discusses is the influence of parents' emotional state, parenting behavior, and socioemotional development in the child. McLoyd states that because parental emotional state is one of the significant determinants of parenting behaviors, economic hardship leading to parental anxiety and depression may increase the tendency of parents to be punitive, inconsistent, unilateral, and generally unsupportive of their children. In order to improve parenting behavior, she suggests parents' social networks include emotional support, information support and role modeling, parenting support, and education about exercise of child-rearing sanctions and controls.
Discoveries of Infancy: Cognitive Development and Learning - Spanish Version

[Video]

Supporting Material:
Discoveries of Infancy: Cognitive Development and Learning - English Version [Video];

*The Program for Infant/Toddler Caregivers
*Developed collaboratively by WestEd, Center for Child and Family Studies, and the California Department of Education, Child Development Division

SUMMARIES

Summary for A Guide to Cognitive Development and Learning
This guide is intended to be used in conjunction with the third module of the Program for Infant/Toddler Caregivers (PITC), a four-module video training course for providers of family and center child care. Discoveries of Infancy, Cognitive Development and Learning [Spanish] is one of those videos. The videos illustrate key concepts and caregiving techniques for a specific area of care, and the guides provide extensive in-depth coverage of each topic. This guide focuses on intellectual development during infancy, with an emphasis both on the types of activities that are naturally interesting to infants and toddlers and on the influences of responsive caregiving, the environment, and play materials on early development. Section One, "Cognitive Development," explores the intellectual activity of infancy (such as the use of reflexes and active experimentation), six discoveries of infancy (such as learning that events are caused and how objects fill space), and facilitating cognitive development through caregiver responsiveness. Section Two, "Learning Environments," discusses the role of the physical environment in influencing the development of infants and toddlers and providing appropriate physical environments. Section Three, "Developmental Milestones," explores the stages of development from birth to age three. Section Four, "Appropriate and Inappropriate Practices," illustrates contrasting caregiver practices in fostering cognitive development in infants and toddlers. Section Five, "Suggested Resources," lists books, articles, and audiovisual material. Contains 48 references.
Summary for Trainer's Manual, Module III - Learning and Development


Bibliographic Information


Availability

May be ordered from:
California Department of Education • CDE Press • Sales Office • P.O. Box 271 •
Sacramento, CA 95812 • (800) 995-4099 phone • (916) 323-0823 fax •
http://www.pitc.org/ web
**Producer Information**

Intended User Audience: The Program for Infant/Toddler Caregivers was developed primarily for professional providers working in family child care homes and centers serving children zero-to-three years old. Beginners and individuals with advanced level of experience will find these materials useful. These materials were developed for a universal population. These materials may be used in a variety of settings including inservice training and college settings. These materials were initially developed for use in the state of California. However, they are being used throughout the United States and its territories.

Product Development: These materials were developed through funding received from the California Department of Education and various private foundations. For more information regarding funding sources, please contact WestEd. The staff of the California Department of Education and WestEd collaboratively developed these materials with the help of practitioners, administrators, and nationally-recognized experts from the field of early education with a focus on children ages zero-to-three years. In addition, film experts assisted in the development of the videos. A California-based professional translator did the Spanish translation of the trainer’s manual handouts and transparencies. An early childhood professional and translator did the Chinese (Cantonese) translation of the materials.

Product Evaluation: The developers of these materials are in the process of evaluating the project and the module training institutes. Based on anecdotal reports from users (e.g., practitioners, trainers, and experts), these materials have been highly rated and are well received. The program has also been awarded a Golden Apple award from the National Educational Film Festival.

Product Dissemination: As of 1998, over 150,000 copies of these materials have been distributed and sold in the United States (including its territories), Australia, Israel, Italy, Korea, Mexico, and New Zealand.
Getting in Tune: Creating Nurturing Relationships with Infants and Toddlers

[Video]

Supporting Material:

*The Program for Infant/Toddler Caregivers

*Developed collaboratively by WestED, Center for Child and Family Studies, and the California Department of Education, Child Development Division

SUMMARIES

Summary for Getting in Tune: Creating Nurturing Relationships with Infants and Toddlers [Video]
This 24-minute videotape is part of Module 1 of the Program for Infant/Toddler Caregivers (PITC), a four-module video training course for providers of family and center child care. This video emphasizes the importance of responsive caregiving and explores a process for getting in tune with infants and toddlers in a child care setting. The caregiver who can follow the lead of children, pick up their rhythms, and let them know that their messages are understood is in tune with those children. Children learn that someone else understands their emotions and feelings, and this closeness to the caregiver is the foundation of healthy emotional growth in which the child develops a sense of security and self-esteem. Examples of situations where a caregiver and child are out of tune are presented, followed by examples of caregivers who are in tune. Finally steps are outlined that caregivers can take to prepare themselves to get in tune with infants and toddlers. These steps include: (1) study child development; (2) get to know the children’s families and their cultures; (3) develop self-awareness; and (4) learn the responsive process of watching, asking, and adapting.

Rich in practical guidelines and suggestions and intended for use with videos illustrating key concepts and caregiving techniques, this guide was written to help caregivers with their day-to-day efforts to nurture social and emotional growth in infants and toddlers. The guide is divided into five sections. In the first three sections, nationally recognized experts approach the question of how caregivers can nurture early social and emotional growth. Concerning the developing self, papers in Section
Summary for Infant/Toddler Caregiving ... (cont.)

I discuss temperaments of and emotional development in infants and toddlers.

Continuing the focus on the development of social skills, section 2 presents papers on creating nurturing relationships with infants and toddlers, and on self-esteem, security, and social competence. Section 3, on guidance, includes a paper on socialization, guidance, and discipline with infants and toddlers. The papers in each section are followed by related information from research and practice; concrete examples are given of caregiver actions that support growth. Section 4 contains examples of appropriate and inappropriate caregiving behavior in the areas of social-emotional growth and socialization. The concluding section 5 directs the reader to additional readings and appropriate audiovisual materials.

Summary for Trainer's Manual, Module I: Social-Emotional Growth and Socialization

This trainer's manual covers module I of the Program for Infant/Toddler Caregivers (PITC), a four-module video training course for providers of family and center day care. The manual is intended to be used by module instructors and includes an overview of the PITC and instructions for using the manual and its accompanying videos. The module contains 14 lessons, each designed to be covered in a 2-hour session. Titles are as follows: (1) "The Vision;" (2) "Flexible, Fearful, or Feisty;" (3) "Working with Temperament;" (4) "Getting in Tune;" (5) "The Responsive Process;" (6) "Ten Gifts;" (7) "Emotional Development in Infants and Toddlers;" (8) "The Developing Emotional Strengths of Children;" (9) "Fostering Emotional Development: The Caregiver's Role I;" (10) "Fostering Emotional Development: The Caregiver's Role II;" (11) "Socialization and Guidance;" (12) "Socialization and Guidance: Caregiver Practices;" (13) "First Moves;" and (14) "Helping Children and Parents Adjust to a New Program." An outline of the three accompanying videos for this module, and pricing and ordering information for all four PITC modules, are also included.

Bibliographic Information

Availability
May be ordered from:
California Department of Education • Bureau of Publications • Sales Unit • 560 J St.,
Suite 220 • Sacramento, CA 95814 • (800) 995-4099 phone • http://www.pitc.org/web

Contact the California Department of Education for current price information. PITC videos are available in Spanish, English and Cantonese; accompanying video magazine in English and Spanish; Trainer’s Manual Handouts and Transparencies in English and Spanish. Guides are in English only at the present time.

Producer Information
Intended User Audience: The Program for Infant/Toddler Caregivers was developed primarily for professional providers working in family child care homes and centers serving children zero-to-three years old. Beginners and individuals with advanced level of experience will find these materials useful. These materials were developed for a universal population. These materials may be used in a variety of settings including inservice training and college settings. These materials were initially developed for use in the state of California. However, they are being used throughout the United States and its territories.

Product Development: These materials were developed through funding received from the California Department of Education and various private foundations. For more information regarding funding sources, please contact WestEd. The staff of the California Department of Education and WestEd collaboratively developed these materials with the help of practitioners, administrators, and nationally-recognized experts from the field of early education with a focus on children ages zero-to-three years. In addition, film experts assisted in the development of the videos. A California-based professional translator did the Spanish translation of the trainer’s manual handouts and transparencies. An early childhood professional and translator did the Chinese (Cantonese) translation of the materials.

Product Evaluation: The developers of these materials are in the process of evaluating the project and the module training institutes. Based on anecdotal reports from users (e.g., practitioners, trainers, and experts), these materials have been highly rated and are well received. The program has also been awarded a Golden Apple award from the National Educational Film Festival.

Product Dissemination: As of 1998, over 150,000 copies of these materials have been distributed and sold in the United States (including its territories), Australia, Israel, Italy, Korea, Mexico, and New Zealand.
Infancy: Early Relationships

[Video]

Alice Giordano, Janet Gonzalez-Mena, Arleen Prairie, Barbara Lancelot, Rhoda Olenick

Summary
This 19-minute videotape recording is part of a series that provides the setting for the understanding of the unfolding process of human development from the beginning of life through adolescence. This videotape focuses on the importance of early relationships for the development of infants. It emphasizes the effects of the parent-child relationship on self-esteem, and the development of trust or mistrust. The characteristics of prenatally drug-exposed infants are discussed, as well as infants suffering from Growth Failure Syndrome. Attachment behavior and separation anxiety are explained, and the importance of bonding is highlighted.

Bibliographic Information

Availability
May be ordered from:
Magna Systems, Inc. • 101 North Virginia St., Suite 105 • Crystal Lake, IL 60014 • (800) 203-7060 phone • (815) 459-4280 fax • magnasys@ix.netcom.com e-mail • http://www.magnasystemsvideos.com/ web

Producer Information
Intended User Audience: The intended audience for this material is teachers, caregivers, and service providers in early childhood education.

Product Development: The above authors, who are professionals in early childhood education, along with the people who appear in each videotape developed the videotapes. Those in the videotapes are from a variety of cultural and linguistic backgrounds, including European Americans, Asian Americans, Hispanics, and African Americans.
Producer Information (cont.)

Product Evaluation: The series has not been formally evaluated.

Product Dissemination: Thousands of the videotapes have been distributed throughout North America and worldwide.
Dancing Cheek to Cheek: Nurturing Beginning Social, Play and Language Interactions

Laura Meyers
Pamela Lansky

Summary
This booklet summarizes the findings of a research project that investigated the effectiveness of different strategies for developing social, play, and language skills in babies with severe visual impairments. The four-year research project involved 10 infants and toddlers (ages 5-39 months) and their parents. The booklet discusses effective strategies gleaned from the research project in three parts. The first part discusses beginning a relationship with a baby with visual impairments. It describes how parents and babies should start getting to know each other and how to use language to socially interact with each other. The second part provides suggestions on introducing new toys to the baby, choosing the best toys, and making toys a part of a relationship with the baby. The final section addresses encouraging language development, including letting the baby know that things have names, setting up the play so that it's easy to talk about, linking the baby's words to his play, and signs that the baby is having fun during play time. Each section closes with a "Getting Down to Basics" page summarizing strategies that work and those that do not work. Case examples throughout the text illustrate effective parent-child interaction.

Bibliographic Information

Availability
May be ordered from:
Blind Children's Center • 4120 Marathon Street • Los Angeles, CA 90029 • (800) 222-3566 phone • (323) 665-3828 fax • http://www.blindchilrenscenter.org/ web

Producer Information
Intended User Audience: The intended user audience is parents and family members as well as faculty/trainers, and service delivery personnel in early intervention/early childhood special education.
Producer Information (cont.)
Product Development: Administrators, faculty/trainers, and service delivery personnel were involved in developing this material. This group represented the disciplines of early intervention/early childhood special education and speech pathology. All individuals are European American.

Product Evaluation: At the present time, no formal evaluation has been completed on this material. Currently, there are no plans for evaluation.

Product Dissemination: At the present time, 13,171 copies of this material have been disseminated across the United States as well as internationally.
Summary
This book discusses the current conceptualization of what is appropriate in early childhood education, which is overly narrow in its interpretation of the role of the teacher, and with respect to variations in cultural and developmental diversity. Based on this observation, this book addresses various issues surrounding diversity, inclusion, and appropriate early educational practices. Following an introduction on the ethics of inclusion, the chapters are: (1) “The Politics of Developmentally Appropriate Practice: Exploring Issues of Culture, Class, and Curriculum” (Sally Lubeck); (2) “Inclusive Policy, Practice, and Theory for Young Children with Developmental Differences” (Bruce L. Mallory); (3) “Culture, Child Development, and Developmentally Appropriate Practices: Teachers as Collaborative Researchers” (Rebecca S. New); (4) “Research in Parent-Child Interaction: Guidance to Developmentally Appropriate Practice for Young Children with Disabilities” (Jeanette A. McCollum and Helen Bair); (5) “Expanding the Perceptions of Developmentally Appropriate Practice: Changing Theoretical Perspectives” (Barbara L. Ludlow and Terry R. Berkeley); (6) “Understanding Development in a Cultural Context: The Challenge for Teachers” (Barbara T. Bowman and Frances M. Stott); (7) “The Movement of African-American Children through Sociocultural Contexts: A Case of Conflict Resolution” (Carol Brunson Phillips); (8) Developmentally Appropriate Practice and Cultural Values: A Case in Point (Leslie R. Williams); (9) “Parents, Pluralism, and the NAEYC Statement on Developmentally Appropriate Practice” (Douglas R. Powell); (10) “Blending Developmentally Appropriate Practices and Early Childhood Special Education: Redefining Best Practice to Meet the Needs of All Children” (Jane B. Atwater and others); (11) “Designing Meaningful Measurements for Early Childhood” (Samuel J. Meisels); (12) “Teacher Perspectives on the Strengths and Achievements of Young Children: Relationship to Ethnicity, Language, Gender, and Class” (Marianne N. Bloch and others); and (13) “Language and Diversity in Early Childhood: Whose Voices Are Appropriate?”

Bibliographic Information
Availability
May be ordered from:
Teachers College Press • 1234 Amsterdam Avenue • New York, NY 10027 •
(212) 678-3929 phone • (212) 678-4149 fax • tcpress@www.tc.columbia.edu e-mail •
http://tc-press.tc.columbia.edu/ web

This book can be purchased through local bookstores.

Producer Information
Intended User Audience: This book is intended for faculty/trainers, students, service delivery personnel, and paraprofessionals. It is intended for professionals in the fields of early childhood education, early intervention/early childhood special education, and social work. This material is intended for multicultural groups.

Product Development: This book was developed by faculty in early childhood education/early childhood special education. The developers are English-speaking European Americans.

Product Evaluation: There has been no official evaluation.

Product Dissemination: This book has been disseminated primarily to graduate students in the U.S.

Linda K. Elliot

Summary
Designed for new parents, this booklet is a guide to support parents in caring for their baby during the first six months in a way that will prepare him to reach his potential socially, physically, and intellectually. It focuses not only on the baby’s development and needs, but also on the parent-child relationship. Information is provided on early brain development, and parent strategies for providing a trusting environment, feeding, sleeping, holding and touching, developing eye contact, talking, consoling, and playing with their infant. Basic care of an infant is described, along with feelings parents might have, and the physical development of an infant. The last part of the booklet includes blank forms for parents to use to record baby’s firsts, favorite things, and characteristics. A list is also included of newborn safety tips addressing sleeping, feeding, promoting health, and ensuring safety.

Bibliographic Information

Availability
May be ordered from:
Great Kids, Inc. • 3222 Shadyhill Drive • San Angelo, TX 76904 •
(800) 906-5581 phone • (915) 224-4417 fax • info@greatkidsinc.org e-mail •
http://www.greatkidsinc.org/home.html/ web

Contact producer regarding price.

Producer Information
Intended User Audience: This material is a revision of the 1992 material entitled “A Dance with Your Baby.” The developer’s information below is for that material. This booklet was written primarily for parents of newborns with a focus on supporting the growth of positive parent-child relationships. The English version was written for a multiethnic and multilingual population with English proficiency. It has been used extensively in home visitation programs in the United States and abroad. It has also been used in university settings for instructional purposes.
Producer Information (cont.)
Product Development: Information provided in this booklet is based on the needs of families with newborns. As a supervisor in an early intervention program, the author observed personnel struggling with how to share information with parents regarding newborn care that would not only support healthy newborn development, but also the growth of nurturing, responsive parent-infant relationships. This booklet was written to be shared and discussed with parents from a variety of cultural backgrounds, some with limited reading skills.

Product Evaluation: The original English version was evaluated by Prevent Child Abuse America (formerly The National Committee to Prevent Child Abuse), and used as part of its Healthy Families America Program. It was field tested with the families served through the early intervention home visitation program of the Hawaii Family Support Center. The original material (A Dance with Baby) was revised based in part on reviews from the CLAS Early Childhood Research Institute.

Product Dissemination: As of 2000, approximately 300,000 copies in Spanish, Vietnamese, English, and Tagalog had been distributed and sold in Canada, the Philippines, and the U.S. Approximately 1000 families in the Philippines have used the Tagalog version; Approximately 300-400 families have used the Vietnamese version.

[Handbook]

Marci J. Hanson
Mary S. Krentz

Summary
This guide for early intervention program personnel outlines and describes methods for assisting parents and infants to better communicate with one another. The focus is on helping parents to read their children's cues, to engage in reciprocal interactions, to time interactions according to their babies' cues, and to enjoy interacting with their babies. The methods discussed are designed for early intervention programs serving parents and caregivers of children with disabilities or children who are at risk for developmental delay. The first section of the manual, "Rationale for Intervention Approach," presents both the theoretical rationale and the clinical evidence for taking this particular approach in working with families. It also provides a description of major paradigms currently utilized in the field to observe and evaluate parent-child interactions. The second and major section, "Intervention Framework and Strategies," describes the intervention approach and provides a variety of specific strategies that can be utilized by infant development specialists, working in an early intervention program with infants at risk and their families. The final section of the manual presents several detailed case studies that demonstrate how the intervention approach was implemented with different families. (Contains 35 references.)

Bibliographic Information

Availability
No longer available from producer, available on the CLAS Web site.
San Francisco State University, Project ISIS • Project ISIS • 4 Tapia Drive • San Francisco, CA 94132 • (415) 338-1630 phone
Producer Information

Intended User Audience: This module was written primarily for faculty trainers, pre- and inservice students, administrators, and service delivery personnel. The authors indicated that this manual may be useful to all disciplines working in the early intervention profession. The information provided falls between an introductory and advanced level. The module was written for a universal population for whom English is the first language or who are proficient in English. This module was initially developed for individuals residing throughout the United States.

Product Development: This material was developed by Hanson and Krentz, under the funding of a US Department of Education grant. Family members, early intervention service delivery personnel (e.g., special education teachers, occupational therapists, speech pathologists, and psychologists) participated in the development of this material. Participants represented Latino, African American, Chinese, and Euro-American groups.

Product Evaluation: None—but are interested in field-testing this material at a future date.

Product Dissemination: As of 1998, over 1,000 copies had been distributed and sold. Major orders came from California. In addition, this material was also distributed in state, national, and international (e.g., Australia, New Zealand, Spain) conferences.
**Summary**

This booklet for Spanish-speaking parents of premature babies in newborn intensive care units provides information on the role parents can play in helping their baby develop while still in the hospital, and in the early months after discharge. Topics addressed include the following: (a) gestational age; (b) development of young infants; (c) infant communication through behavior; (d) the effects of maturation; (e) behavioral cues (physiology, motor, and state); (f) stress cues; (g) self-regulation skills; (h) how to help the baby by adjusting lighting, reducing noise, positioning, and holding; (i) comforting the baby; (j) playing with the baby; (k) bringing the baby home from the hospital; and (l) consoling the baby. The material is presented in Spanish.

**Bibliographic Information**


**Availability**

May be ordered from:
Communication Skill Builders • 555 Academic Court • San Antonio, TX 78204 • (800) 228-0752 phone

**Producer Information**

Intended User Audience: The intended user audience is parents of premature infants from any cultural group.

Product Development: This material was developed by faculty and trainers from the disciplines of medicine, nursing, and social work. The developers were English- and Spanish-speaking European Americans. Information is not available regarding the professional background of the individuals assisting with the Spanish translation.
Producer Information (cont.)

Product Evaluation: This material has not been formally evaluated, and there are no plans for such an evaluation at the present time.

Product Dissemination: The material has been disseminated all over Texas and other parts of the U.S. The number of copies of the material that have been disseminated is not available.
About the CLAS Early Childhood Research Institute

Early Childhood Research Institute on Culturally and Linguistically Appropriate Services

University of Illinois at Urbana-Champaign
The Council for Exceptional Children
University of Wisconsin-Milwaukee
ERIC Clearinghouse on Elementary and Early Childhood Education
ERIC Clearinghouse on Disabilities and Gifted Education

Overview

The Early Childhood Research Institute on Culturally and Linguistically Appropriate Services (CLAS) is a federally-funded collaborative effort of the University of Illinois at Urbana-Champaign, The Council for Exceptional Children, the University of Wisconsin-Milwaukee, the ERIC Clearinghouse on Elementary and Early Childhood Education, and the ERIC Clearinghouse on Disabilities and Gifted Education. The CLAS Institute is funded by the Office of Special Education Programs of the U.S. Department of Education.

The CLAS Institute identifies, evaluates, and promotes effective and appropriate early intervention practices and preschool practices that are sensitive and respectful to children and families from culturally and linguistically diverse backgrounds. CLAS has several basic assumptions which define and guide its work. CLAS’ goals are outlined below, as well as some of the issues and concerns important to our work. Finally, a brief overview is included about the outcomes we anticipate accomplishing by the end of this project.

Assumptions

We adhere to the following fundamental beliefs in our research, training and dissemination activities:

Assumptions About Culture and Language:

1. Individuals and families are members of multiple cultures.
2. Cultures are multi-faceted and dynamic.
3. Multilingualism is an asset.
4. A solid foundation in one’s primary language contributes to acquisition of a second language.
5. Cultural competence is a process entailing lifelong learning.
6. Many people have not had an equal voice, equal representation or equal access to health and education services. We recognize that institutional racism continues and will address issues of access and equity in the search, review, and dissemination of materials.

7. Beliefs and attitudes about culture and language shape outcomes; positive beliefs contribute to inclusiveness; negative beliefs undermine it.

Assumptions About the Work of the Institute:

1. Culturally and linguistically diverse practitioners and families will be involved in the work of the Institute as advisors, reviewers, and evaluators.
2. Materials will reflect the intersection of culture and language, disabilities and child development.
3. A range of strategies or approaches will be identified from which practitioners, families, and researchers can make an informed selection of practices or materials. In our dissemination of reviewed materials, we will not advise or prescribe solutions but will facilitate better questions regarding material selection.
4. Products will be “user amorous” and our evaluation will in part focus on the usability and impact of these products.

The work of the Institute is complex, challenging, and developmental in nature.

Goals
The CLAS Institute identifies, collects, reviews, catalogs, abstracts, and describes materials and practices developed for children and families from culturally and linguistically diverse backgrounds, and professionals who work with them. In the latter years of this five-year Institute, CLAS will identify gaps in existing materials and practices, prepare translations of a limited number of materials, and pilot-test a limited number of promising materials to ensure that effective early intervention practices are available to families and service providers who work with them. CLAS will:

1. Create a resource bank and catalog of validated culturally and linguistically appropriate materials, and of documented effective strategies, for early intervention and preschool services.
2. Conduct a review of materials by experts in the fields of early childhood education, early intervention/early childhood special education, and in multicultural education, considering issues not only of effectiveness but also of social, cultural, and linguistic acceptability to children and families from culturally and linguistically diverse backgrounds.
3. Evaluate and validate selected materials through field testing of the materials with culturally and linguistically diverse backgrounds.
4. Disseminate reviewed materials and practices that meet the dual criteria of (1) effectiveness and (2) cultural and linguistic appropriateness for all relevant stakeholders.
About the Authors

Jeanette A. McCollum, Ph.D.
University of Illinois at Urbana-Champaign • Department of Special Education • 1310 S. Sixth St. • Champaign, IL 61820

Jeanette is a Professor Emeritus of Early Childhood Special Education, and a faculty collaborator on the CLAS Project at the University of Illinois. She has written extensively on parent-child interaction and its role in children’s development. Most recently, her research has addressed cultural variation in parent-child interaction and the implications of parental belief systems for interaction and intervention. A primary focus of Jeanette’s career has been the quality of early intervention personnel, and she hopes to contribute further to this area by contributing to cross-cultural understanding.

Tweety J. Yates, Ph.D.
University of Illinois at Urbana-Champaign • 51 Gerty Drive • Champaign, IL 61820

Tweety is a visiting research assistant professor in early childhood special education at the University of Illinois, and a faculty collaborator for CLAS Early Childhood Research Institute. She is presently coordinating two federal grants. One project is a research grant that focuses on the replication and evaluation of a parent-child interaction model and the other is an outreach grant that focuses on training and replication of a model that promotes developmental and readiness skills through a creative arts curriculum. Most recently, her research has addressed cultural variation in parent-child interaction and the implications of parental belief systems for interaction and intervention. Her primary research interests include parent-child interaction and personnel preparation.
For more information on the CLAS Early Childhood Research Institute ...

Contact Amy Santos or Rob Corso (Project Coordinators) or Ron Banks (Information Specialist):

Early Childhood Research Institute on Culturally and Linguistically Appropriate Services University of Illinois at Urbana-Champaign 61 Children's Research Center 51 Gerty Drive Champaign, Illinois 61820-7498

1.800/583.4135 voice
http://clas.uiuc.edu/ web clas@ericps.crc.uiuc.edu e-mail

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  • Cultural Definitions and Issues
  • View of Disability
Deaf Parents and Their Hearing Children
Family Information Gathering
Family Support Services
Helping Relationships and Service Utilization
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Second-Language Acquisition
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