Social-Emotional Development of Toddlers: Randomized Controlled Trial of an Office-Based Intervention

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Purpose: During the toddler years, temper tantrums and impulsive behaviors are the norm. These behaviors can frustrate even the most experienced mothers.

Design and Methods: A prospective, double blind, randomized controlled trial using pre-test/post-test experimental design was used to examine the effectiveness of an office-based educational program to improve maternal confidence and the social-emotional development of toddlers. The Toddler Care Questionnaire (TCQ) was administered to all mothers as a pre and post intervention test. The treatment intervention was a videotaped (DVD) parenting skills intervention on the social-emotional development of toddlers and on maternal confidence in caring for toddlers.

Results: Sixty mothers and 60 toddlers entered the study with 29 mother-toddler dyads randomized to the treatment group and 31 to the control group. Twenty-six (26) mother-toddler dyads in the treatment and 25 mother-toddler dyads in the control group completed the study. Pairwise comparisons of adjusted means showed significant improvements for both toddler groups on the Brigance toddler screen, and no statistically significant difference in gains seen by treatment groups.

Conclusions: Brief educational programs on DVD’s are an efficient way to offer information to mothers while in the office waiting area. Practice Implications: Pediatric nurses who encounter mothers who struggle with caring for their toddlers may find brief-office based interventions a valuable tool for educating parents.

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Introduction

Background

Today toddlers are being raised in a variety of traditional and complex family situations. During the toddler years, temper tantrums and impulsive behaviors are the norm. These behaviors can frustrate even the most experienced mothers. This frustration is evident in the 2014 national data that show the youngest children are the most vulnerable: 27% of the reported victims of child abuse and neglect are under the age of three (Center for Disease Control and Prevention (CDC) Injury prevention and Control Division of Violence Prevention, 2016). Children’s Bureau An Office of the Administration for Children and Families (2014) reported that an estimated 1580 children died from child abuse and neglect, representing a rate of four children dying every day in the U.S. from abuse and neglect. Children under the age of three accounted for 70.7% of these fatalities: 40.1% were infants and 33.6% were between one and three years old (https://www.childwelfare.gov/pubPDFs/fatality.pdf).

Lerner and Ciervo (2010) conducted a public opinion poll by interviewing 1615 parents of children ages birth to 36 months. The authors reported that parents of toddlers confront the following behaviors on a regular basis: temper tantrums, crying and controlling emotions, biting and fighting, not listening, sleeping and bedtime issues, potty training, and food issues (Lerner & Ciervo). Toddler behaviors viewed as problematic by mothers have been linked to maternal negative behaviors and stress (Calkins, 2002). Adverse toddler behaviors have been identified as a precursor to low maternal self-esteem and a lack of maternal confidence (Hutchings, Appleton, Smith, Lane, & Nash, 2002). Walker and Sprague (2000) concluded that once social-emotional problems are established in a young child, it is difficult to
alter their behavior, as the children are highly resistant to change. Other researchers have confirmed that untreated social-emotional problems become chronic problems as the child continues to age (Cooper, Masi, & Vick, 2009; DeCarmen-Wiggins & Carter, 2001; Zimmer-Gembeck et al., 2015). The prevalence of social-emotional problems among toddlers has been estimated to be between 9.5% and 14.2% of children between birth and 5-years old (Brauner & Stephens, 2006). The prevalence of social-emotional problems for children living in at-risk environments is estimated to be between 17% and 25% and the children are more likely to have behavioral problems that adversely impact their development (Knapp, Ammen, Arstein-Kerslake, Poulsen, & Mastergeorge, 2007).

Positive maternal-toddler interactions high in maternal sensitivity to the needs of the toddler have been linked to positive outcomes for the toddler and include a more secure mother-toddler attachment (Ainsworth, Blehar, Waters, & Wall, 1978; Clucas, Skar, Sherr, & von Tetzchner, 2014; DeWolff & van Ijzendoorn, 1997) and fewer behavioral problems exhibited by the toddler (Smith, Calkins, Keane, Anastopoulos, & Shelton, 2004). Sugisawa et al. (2010) examined the trajectory patterns of parenting by caregivers raising toddlers and its effect on the social competence of the toddlers. The researchers used the Interaction Rating Scale (IRS) to evaluate toddler social competence and the Index of Child Care Environment (ICCE) to analyze the caregivers’ responses to the toddler. Sugisawa et al. concluded that the development of toddler social competence is directly related to consistent and positive parenting.

Researchers have demonstrated that parenting programs focusing on behavioral changes can have a positive short-term effect on the mother’s psychosocial health (Barlow, Coren, & Stewart-Brown, 2003). Mendelsohn et al. (2007) conducted a randomized controlled trial (RCT) using videotaped interactions by child developmental specialists for 99 Latina mothers to support toddler development. The results revealed decreased levels of parenting stress, an increase in cognitive development and decrease in developmental delays displayed by the toddlers in the treatment group. The researchers concluded that pediatric primary care-based interventions can effectively improve development in toddlers. Hayes, Matthew, Copley, and Welsh (2007) conducted a RCT of a mother-toddler parenting program and demonstrated that delivery of a one-day intervention for distressed mothers contributed to reducing parental stress and an improvement in reducing toddler behavior problems.

Olds, Sadler, and Kitzman (2007) conducted a review of the evidence from 19 RCT’s that focused on promoting parenting of infants and toddlers prior to the emergence of parenting problems. The researchers discussed the importance of following the Institute of Medicine’s rigor for design and implementation of RCTs using the principles of epidemiology and theory. They also recommended conducting smaller trials to assure the success of the intervention before conducting large scale RCTs. Olds et al., concluded that programs in which visiting nurses began parenting interventions with high-risk families during the prenatal period and with first time mothers during the infant’s first two years of life were most successful in improving the prenatal health of the mother and subsequently the child’s health and development when the nurses were specifically trained to provide services to the parents.

Buss and Kiel (2010) examined changes over time of toddlers’ fearful behaviors when protective mothering behaviors were employed. They found that maternal protective behaviors were directly related to regulation of their toddlers’ distress. They concluded that their study contributes initial evidence that in-the-moment influence between parents and toddlers is important for control of the toddlers’ fearful behaviors.

The impetus for conducting our RCT were general observations made by the Principal Investigator (PI) and Co-Investigator (Co-I) of mother-toddler interactions in waiting areas in a pediatric primary care office in which mothers were interacting inappropriately with toddlers escalating challenging toddler behaviors. The mother-toddler interactions were also viewed as impeding the social-emotional development of these toddlers. Thus, an urgency to implement strategies to improve mother-toddler interactions, the social-emotional development of toddlers, and potentially reduce the potential for harm to toddlers was the rationale for the study design.

The focus of this study was to evaluate the effectiveness of a pediatric primary care office-based parenting skills intervention to improve 1) maternal confidence in caring for a toddler and 2) the social-emotional development of toddlers.

### Theoretical and Evidence-Based Development of the Treatment Intervention

The treatment interventions, designed by the PI and Co-I, were based on Watson’s caring theoretical framework, specifically the helping-trusting relationship (Watson, 1997, 2003). At the center of the helping-trusting relationship is the intercommunication and transpersonal identity with the concomitant release of human feelings for each other (Watson, 1997). A helping and trusting relationship evolves in caring moments when the mother embraces the toddler in times of opposing emotions such as love/anger, happiness/frustration, and is accepting of both the positive and negative feelings expressed by the toddler.

For teenage mothers to develop a helping-trusting relationship with their toddler, they need to meet their own adolescent developmental milestones as they progress through the turbulent teenage years with the goal of growing into successful adults. Adolescent parenting is an early transition to an adult role that is out of sequence with the social norms of the adolescent (Jemmott, Jemmott, Hutchinson, Cederbaum, & O’Leary, 2008). A high level of teen parental stress is expected. Parental stress has been shown to have a direct negative effect on the psychological health of young children of teenage mothers (Cooper et al., 2009). However, parental stress and toddler behaviors can adversely affect the maternal confidence of all mothers caring for toddlers, with a resultant decrease in the social-emotional development of toddlers (Cooper et al.). The premise for the treatment intervention is based on evidence that mothers of all ages who are actively involved in the process of physically and emotionally caring for the toddler and who are sensitive and affectionate towards the toddler in their daily interactions will experience personal ‘growth in connection’ (Surrey, 1991) to the toddler and foster the development of maternal confidence. The feelings of ‘connectedness’ of the mother to the toddler that emerges from mutual feelings of caring were hypothesized to increase the social-emotional development of the toddler (Hallas, 2002).

### Objectives

The objectives for this RCT were to evaluate the impact of a pediatric primary care office-based videotaped (DVD) parenting skills intervention on 1) the social-emotional development of toddlers and 2) maternal confidence for mothers raising toddlers.

### Hypothesis

1. There will be a greater increase in the social-emotional development of toddlers as measured by the Brigance Toddler Screen for toddlers whose mothers receive the treatment intervention (treatment group) in a pediatric primary care office-based practice as compared to toddlers in the control group whose mothers receive the standard office-based care.

2. There will be a greater increase in maternal confidence for mothers who receive the parenting skills intervention (treatment group) in a pediatric primary care office-based practice as measured by the Toddler Care Questionnaire (TCQ) compared to mothers in the control group who receive the standard office-based care.

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