Empirical studies on early intervention services for toddlers aged 24–36 months: A systematic review

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ABSTRACT

This systematic review aimed to examine empirical evidence relating to the level and developmental appropriateness of service provision for two-year-olds. To be included in this review, studies had to have been published before 2006, had to have an explicit focus on service provision for two-year-olds and had to have a randomly assigned control group. Following the application of the inclusion/exclusion criteria, 11 studies were included in the review. The relatively small number of eligible studies and findings suggesting a limited impact from a number of the studies suggests there is a lack of empirical evidence available. Therefore, determinations with regards to what constitutes as developmentally appropriate and effective practice for this age group could not be made.

1. Introduction

An ever increasing body of international research highlights the significance of early childhood education and care for ensuring the wellbeing of young children and fostering a range of developmental skills required to thrive in later life (Organisation for Economic Co-operation and Development [OCED, 2015]). Therefore, the provision of effective early intervention programmes remains a key priority for the majority of contemporary societies (International Society on Early Intervention, 2017) and enrolment to early childhood services has been increasing in many countries, particularly for children under three (OCED, 2015). Given this increase in enrolments, further consideration is being given to the content, pedagogy and quality of programmes and services, in order to determine what works for improving outcomes for very young children (OCED, 2015). However, McGuinness, Eakin, and Connolly (2012) report a notable gap in the research base regarding service provision for two year olds and Mathers, Eisenstadt, Sylva, Soukakou, and Eriky-Stevens (2014) suggest current knowledge regarding the factors that enable toddlers to thrive has not been successfully translated into developmentally appropriate practice.

This review aims to examine empirical evidence relating to the level and developmental appropriateness of service provision for two year olds. It will begin by offering a brief overview of the context for service provision for two year olds, placing a particular emphasis on early intervention. Following an outline of the methodological procedure the findings from this systematic review will be presented based on intervention type and developmental areas.
1.1. Early intervention definitions and models

Early intervention has been recognised as an essential component in reducing underachievement and improving outcomes for children (Department of Education (DE), 2013). However, the definition of early intervention is not clear, nor is the time span for what constitutes as intervening ‘early’. One definition suggests early intervention is intervening both early in a child’s life in terms of chronological age and/or early in relation to the onset of the adversity (Dawson, Dunn, and Morgan, 2010). Allen (2011) provides a more focused definition of early intervention; suggesting it refers to policies and services that relate specifically to children under three.

Placing particular emphasis on children under three can be justified due to the period of rapid neurological growth that occurs during this time (Perry, 2014). This rapid development means infants and toddlers are especially vulnerable to their environment, and therefore support may be required to ensure wellbeing and promote achievement of developmental milestones (Burchinal, Campbell, Bryant, Wasik, & Ramey, 1997; Ramey & Ramey, 1998; Schweinhart & Weikart, 1989). The second year of life is particularly critical for this support as the toddler years have notoriously been considered key with regards to parent expectations, discipline techniques, behaviour and overall development (Brock, O’Hara and Grekin, 2015). Gardner, Shaw, Dishion, Burton, and Supplee (2007) support this, acknowledging the transition from infancy to toddlerhood can increase stress and conflict in parent-child relationships due to the child’s increasing mobility and exploratory behaviour, alongside an inability to regulate emotions or consider safety. In addition, toddlerhood is typically when developmental difficulties and delays can first be observed, with diverging trajectories between advantaged and disadvantaged children first becoming apparent between 12 and 30 months (Black et al., 2000). These diverging trajectories intensify over time, with Mathers et al. (2014) reporting a 19 month gap in school readiness between the most and least advantaged four and five year olds in the United Kingdom, highlighting the importance of intervention at the early possible stage.

Numerous early intervention services and programmes have been developed and delivered globally, ranging from small scale, bespoke programmes to nationally funded initiatives. For example, in the United States of America (USA), Head Start was created in 1965 to support school readiness for low income pre-school children (Currie & Thomas, 1995) and Early Head Start was launched in 1994 to support mothers, infants and toddlers from disadvantaged backgrounds (Barnett & Hustedt, 2005). Today, Head Start and Early Head Start programmes are delivered in every US state, to over one million children each year (Early Childhood Learning and Knowledge Centre, 2017). Similarly in the United Kingdom (UK), Sure Start was launched in 1998 with the aim of giving children the best possible start in life (Glass, 1999). Offering a broad range of services that focus on family health, early years care and education and improved well-being, Sure Start services are available to any family with a child aged 0–4, provided they live within an identified Sure Start area.

Another early intervention initiative has been implemented in England through the introduction of government funding for an additional year of pre-school provision for disadvantaged two year olds (Ballock, Fitzgerald, & Kay, 2013). This is supported by research carried out by Melhuish, Quinn, Hanna, Sylva, Samons, Siraj-Blatchford, and Taggart (2006), who found extending the duration of preschool provision to two years improved child outcomes. Phaira and Davis (2015) acknowledge some challenges with this, particularly the significant developmental differences between two year olds and older pre-school children. Hutchin (2013) affirms this, suggesting failing to consider how the needs of two year olds differ from those of three and four year olds is likely to result in inadequate and ineffective provision.

The difficulty in designing and delivering interventions to meet the specific developmental needs of two year olds is affirmed by McGuinness et al. (2012) who acknowledge the research base regarding provision for two year olds is at a very early stage and by Mathers et al. (2014) who suggest our knowledge regarding the factors that enable toddlers to thrive has not been translated into successfully creating developmentally appropriate Early Years environments.

1.2. Objectives

This systematic review aims to examine empirical evidence relating to the level and developmental appropriateness of service provision for two year olds.

The following questions were explored:

1. What services and interventions currently target two year olds?
2. Of the services and interventions that target two year olds, which have empirical evidence regarding their level of effectiveness?
3. What can be learnt about core components of services and interventions for two year olds from the empirical evidence?

The overarching goals of this review are to increase the availability of relevant evidence-based information and to identify evidence gaps in the effectiveness of services and interventions for two year olds. The review will inform subsequent research, based on the identified evidence gaps.

2. Methodology

2.1. The review process

This research was carried out using a systematic review methodology, defined by Gough, Oliver, and Thomas (2017, pp 2) as “a
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