



# Recent Studies Support Parent-implemented Intervention

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As a Hanen member, you know that parent-implemented intervention is both effective and rewarding. Furthermore, you also know that:

Parents are great candidates to deliver their child's intervention because they...

- are their child's first teacher
- are intrinsically motivated to help their child
- are a constant in their child's everyday environment
- can use everyday interactions as a context for learning
- are able to promote generalization

(Rakap et al., 2014)

And if that's not enough, there's some new empirical evidence that supports our work with families.

Two recent review studies found that parents can learn to implement naturalistic language strategies with their child, and that this results in improved child language outcomes:

- **Rakap & Rakap (2014)** conducted a systematic review of 15 parent-implemented naturalistic language intervention studies of children with a variety of diagnoses (e.g. autism spectrum disorder, language impairment, Down syndrome, etc.)
- **DeVeney, Hagaman & Bjornsen (2017)** looked specifically at parent-implemented interventions that targeted toddlers who are late to talk, and compared the results with studies that examined clinician-directed interventions for this population of children

Read on to find out more about these systematic reviews, as well as insights from another recent study about parents' perceptions of their role in the intervention process (Davies, Marshall, Brown & Goldbard, 2017).

## **Rakap & Rakap asked the question: Is naturalistic parent-implemented language intervention effective for young children with a range of underlying impairments?**

Back in 2011, we shared the results of a review by Roberts and Kaiser (2011), which found that parent-implemented intervention could be as effective (and in some cases even more effective!) than clinician-directed intervention. Roberts & Kaiser's meta-analysis only included studies with group experimental designs, but they acknowledged that a review of single-subject experimental research (SSER) was needed to determine further evidence (Rakap et al., 2014).

In an attempt to fill this void in the literature, Rakap et al. reviewed 15 SSER studies that looked at young children (at least one child in each study was under 60 months), who had language delay resulting from a range of diagnoses. A total of 70 children and 74 parents participated in the studies. All of the interventions studied employed a naturalistic approach, meaning the intervention was delivered by a parent/caregiver who regularly interacted with the child, and the approach included:

- following the child's lead
- child-led activities
- targets that improved the child's ability to participate in classroom activities
- responsive adult-child interactions

(Rakap et al., 2014)

A variety of naturalistic language intervention approaches were used in the 15 studies, including milieu and enhanced milieu teaching, pivotal response training, blended communication and behaviour support, functional communication training, and naturalistic language support. A description of each of these approaches is beyond the scope of this article. For more information, visit the ASHA website (see "Treatment Options" on the linked page).

### **Rakap et al. found the following:**

- Parents can learn to implement a variety of naturalistic language approaches
- When parents use these naturalistic approaches, their children's language skills improve
- Parents and children were able to generalize their newly acquired skills to other settings and use them over time

The authors note that more research is still needed because:

- most parent participants were mothers
- information about the parents and trainers was limited
- while the training procedures were described in detail, the total number of training hours was not provided
- more fidelity data is needed regarding the trainers' implementation of training sessions

- use of parent-implemented naturalistic approaches outside of the clinic needs further evaluation (47% of the studies were conducted in a clinic setting)
- more data about generalization and maintenance is needed

But while further research is needed to gather data about specific features of parent-implemented intervention, Rakap et al., 2014 conclude that:

“Weekly one or two hours of language therapy implemented by a therapist alone may not be sufficient for some children to develop language skills. Therefore, parents’ participation in language interventions is indispensable” (p. 49)

And furthermore:

“...parents’ implementation of naturalistic language intervention approaches is associated with positive language outcomes for children with delays and disabilities” (p. 49)

## DeVeney et al. (2017) asked the question: How effective is parent-implemented intervention for toddlers who are late to talk?

DeVeney et al. (2017) looked specifically at intervention studies pertaining to toddlers (under 36 months) who are late to talk (toddlers for whom the primary concern was expressive language, in the absence of any other significant impairment). They wanted to know whether both clinician-directed and parent-implemented intervention were effective for helping this population of young children.

Their review included 8 studies, two of which were studies of Hanen Parent Programs which included focused stimulation (Girolametto, Pearce & Weitzman, 1996, 1997). Three of the studies involved clinician-directed intervention, three studies examined parent-implemented intervention, and the remaining two studies compared parent- and clinician-implemented intervention. The types of intervention approaches used included general language stimulation, focused stimulation, and milieu teaching.

### DeVeney et al. found the following:

- Both parent- and clinician-directed interventions demonstrated positive outcomes for children
- Parents in parent-implemented intervention demonstrated improved use of language-facilitating strategies and decreased stress levels
- **The two studies that directly compared parent- and clinician-implemented intervention found that parent-implemented intervention resulted in better child outcomes.** Interestingly, while both forms of intervention demonstrated positive child outcomes, parent-implemented intervention had superior outcomes in areas other than expressive language (e.g. other language skills such as receptive outcomes).

The authors explain that more research needs to be conducted because:

- there are no studies comparing clinician- versus parent-implemented intervention using focused stimulation
- treatment setting varied in the studies, and this can be a confounding variable (e.g. is parent-implemented intervention really more effective, or is it the home environment that makes the intervention more effective?)

- comparisons are difficult due to the wide variation in reporting of families' socioeconomic status, ethnicity, children's receptive language status, and parent training procedures utilized

While more research needs to be done, the authors conclude that

**“...intervention provided by either parents or clinicians can effectively improve language and, for late talkers, parent-implemented intervention may be more effective than clinician-directed service provision”** (DeVeney et al., 2017, p. 8)

## What do parents think about their role in intervention?

The above research affirms that parents can learn naturalistic language strategies and provide effective intervention for their child. And in some cases, parent-implemented intervention may be even more effective than clinician-directed intervention (DeVeney et al., 2017; Roberts et al., 2011). But all of this hinges on one important thing....parents, and their willingness to take on the role of intervenor.

In a recent study, Davies, Marshall, Brown & Goldbart (2017) wanted to know what parents thought about their role in the intervention process. They conducted semi-structured interviews of 14 parents of preschool children who were involved in speech and language intervention in the UK. The parents were mostly Caucasian and from low and medium socio-economic groups. Their children were referred for intervention due to speech or language delay and one child was dysfluent. While the sample size of this study is small and may not represent all groups of parents, some of the insights gleaned from their interviews can help us think about how parents may feel as they begin speech and language intervention.

### Davies et al. (2017) found that:

- Parents saw themselves as advocates for their child, and expected to seek out advice and support for their child
- Many parents expected that the speech language pathologist (SLP) would be the one carrying out the therapy directly with the child
- While many parents were interested in learning how to help their child and eager to become involved in their child's therapy, **parents were uncertain about their ability to adopt an intervenor role.** Some parents' uncertainty about their role in intervention generated anxiety about involvement.

In terms of their role as intervenor, Davies et al. explain that parents saw themselves in one of three roles:

- Attender – these parents saw their role as attending appointments with their child, but felt uncertain about how to support their child's development themselves. They were keen for their child to be seen frequently by the SLP.
- Implementer – these parents felt confident doing activities prescribed by the SLP, but gave little indication that they could adapt activities or incorporate the SLP's advice into daily routines

- Adaptor – these parents felt that they needed to adapt their approach to communication and interaction in order to help their child. Some parents described a change in their thinking when they suddenly realized that they needed to change their interaction style.

While parents might not always express their hesitation to us, many parents' feelings about adopting the role of intervener likely echo the sentiments expressed in the Davies et al. study). If parent-implemented intervention is to be effective, we must first ensure that parents understand their role as the primary intervener, and the huge impact they can have on their child. Davies et al. (2017) suggest that SLPs "may need to explicitly negotiate roles before intervention begins, encouraging parents to conceive of their role as an intervener" (p. 182).

We can't assume that the role of intervener will come naturally to parents, nor that they come to intervention with the expectation that this will be their role. In order to empower parents, Davies et al. (2017) suggest that SLPs

"need to consider how their own role can extend beyond assessment and intervention, explicitly assuming a teaching/coaching role to build parents' roles as interveners" (p. 183).

Parent-implemented intervention can be highly effective, but only if we help parents understand the importance of their role in facilitating their child's language development and provide a positive learning environment that builds their confidence. With explicit teaching and coaching, they will learn how to apply responsive interaction strategies and develop a sense of competence, becoming very comfortable with their role as intervener.

To help parents understand their role in language intervention, feel free to distribute *Parents' role in language intervention*.

## References

American Speech-Language-Hearing Association (n.d.). *Spoken Language Disorders*. (Practice Portal). Retrieved July 23, 2017, from [www.Practice-Portal/Clinical-Topics/Spoken-Language-Disorders](http://www.Practice-Portal/Clinical-Topics/Spoken-Language-Disorders).

Davies, K. E., Marshall, J., Brown, L. J. E. & Goldbart, J. (2017). Co-working: Parents' conception of roles in supporting their children's speech and language development. *Child Language Teaching and Therapy*, 33(2), 171-185.

DeVeney, S. L., Hagaman, J. L. & Bjornsen, A. L. (2017). Parent-implemented versus clinician-directed interventions for late-talking toddlers: A systematic review of the literature. *Communication Disorders Quarterly*, 1-10.

Girolametto, L., Pearce, P. S., & Weitzman, E. (1996). Interactive focused stimulation for toddlers with expressive vocabulary delays. *Journal of Speech and Hearing Research*, 39, 1274–1283.

Girolametto, L., Pearce, P. S., & Weitzman, E. (1997). Effects of lexical intervention on the phonology of late talkers. *Journal of Speech, Language, and Hearing Research*, 40, 338–348.

Rakap, S. & Rakap, S. (2014). Parent-implemented naturalistic language interventions for young children with disabilities: A systematic review of single-subject experimental designs. *Educational Research Review*, 13, 35-51.

Roberts, M., & Kaiser, A. (2011). The Effectiveness of Parent-Implemented Language Intervention: A Meta-Analysis. *American Journal of Speech-Language Pathology*, 20, 180–199.

## About The Hanen Centre

*Founded in 1975, The Hanen Centre is a Canadian not-for-profit charitable organization with a global reach. Its mission is to provide parents, caregivers, early childhood educators and speech-language pathologists with the knowledge and training they need to help young children develop the best possible language, social and literacy skills. This includes children who have or are at risk for language delays, those with developmental challenges such as autism, and those who are developing typically.*

*For more information, please visit [www.hanen.org](http://www.hanen.org).*

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