



THE INCREDIBLE YEARS[®] PARENTS AND BABIES SERIES

Home Visiting Coaching

***Coach Guidelines For
Baby Program
(ages 0-1 year)***



Leader Workshop Manual Only

Carolyn Webster-Stratton, Ph.D.

1411 8th Avenue West

Seattle, WA 98119

www.incredibleyears.com

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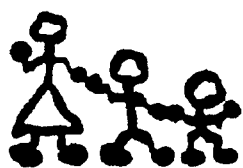
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Incredible Years® Home Visiting BABY Program Coaching Model

Combining Home Visit Coaching With Incredible Years® Baby Group Parenting Program

The optimal way to deliver the Incredible Years® (IY) Parents and Babies series is in a group-based format. In this format, group leaders show video vignettes to groups of parents to encourage their discussion, sharing, practice, and problem solving regarding key parenting principles. Parents enjoy this approach because of the support they receive from other parents and the knowledge that they are not alone in their parenting frustrations or difficulties. Hearing ideas and feedback from other parents often makes participants more willing to try new parenting approaches. Strong friendships are formed in parent groups as they meet each other and their babies and these supportive relationships often continue after the program has ended. Many times parents also sign up for the subsequent IY toddler and preschool programs together.

Multiple research studies with the IY parent programs have shown that most parents will make meaningful changes in their parenting attitudes, feelings and behaviors through this group experience. These changes include parents feeling more confident, less stressed or depressed, more supported and more bonded with their babies. Ultimately we believe parents' responsive, stable, nurturing relationships with their babies form the critical foundation for their babies' healthy brain development, allowing for stronger social and emotional development.

For some parents, however, it may be helpful to combine the group training with a few home visits to focus on specific parent or baby issues. These home visits may be done by "home visiting coaches" who have received authorized training in the Incredible Years concepts and principles. During these home visits, a home visiting coach will help parents practice targeted parenting strategies that they are having difficulty with, directly with their babies. The coach provides modeling, instruction, feedback, praise and support during these home visits and can involve other family members in learning as well. The coach will also show some additional video vignettes not covered in the groups to enhance the parents' learning.

Parents who may benefit from home coaching in this program include the following:

- Parents who have missed some group sessions due to illness or schedule conflicts.
- Parents with developmental delays, postpartum depression, or other mental illness.
- Parents who live too far away to participate in groups.
- Parents referred or mandated to take the program because of abuse or neglect.



Number of Home Visits and Content Planning: The number of home visits provided (in addition to the group sessions) depends on the parents' needs, family situation and progress in the group. The visits should be coordinated with the topics covered in the parent baby groups.

Topic One: Introduction, Goals & Getting to Know Your Baby

Topic Two: Parents as Responsive Communicators and Babies as Intelligent Learners (3-6 months)

Topic Three: Providing Physical, Tactile and Visual Stimulation

Topic Four: Parents Learning to Read Babies' Minds

Topic Five: Getting Support

Topic Six: Babies Emerging Sense of Self (6-12 months)



Note: if a parent missed a particular group session, then an additional home visit coaching session may be scheduled to make up the content covered in this session.

Preparing for Home Coaching Sessions

Home visiting coaches and parent group leaders ideally are the same person, but if not they should meet prior to each home visit to coordinate parenting home intervention plans so the coach is aware of parents' goals. In addition, at this meeting the coach and group leaders share their recommendations for the specific strategies that parents seem to be having difficulty with and determine the focus and goals for more practice and support during home coaching visits.

The Home Visiting Coach will select vignettes to show parents based on the following:

1. Vignettes that have not already been shown in IY parent baby group or need to be repeated because of lack of understanding in the group.
2. Age and developmental status of babies
3. Parenting strategies or concepts that parents are finding difficult to use with their babies.

For example, parents who are struggling with putting their baby to sleep, feeding issues or providing adequate stimulation may see the same vignettes a second time or other vignettes covering a similar concept, that needs further discussion and practice.

Incredible Years® Home Coaching Program

Sometimes parents cannot attend parent groups at all because the group time schedule conflicts with their work schedules, transportation issues, or because of other medical or psychological problems. In this case the entire IY program may be delivered as a home-based model. Home visiting coaches meet with parents in 60 minute sessions to show video vignettes and set up practice sessions with their babies. They explain weekly home activities and check with parents about how these are going at subsequent visits.

Number of Home Visits: It will take a minimum of 10–20, one hour home visits to cover all the topic areas. The number of visits is flexible and will depend on the parents' specific needs. More sessions will be needed for higher risk parents who may need to see more vignettes and have more practice time to result in emotional and behavioral changes. Protocols for specific topics are included in this manual. However, the time needed to complete each of these protocols will vary depending on the parents' knowledge level, baby's sleep schedule, parents' time frame, and other home environment variables such as the presence of other children and family members. The Home Visiting Coach is encouraged to tailor topics and pace the learning according to parents' level of understanding, needs and goals.

Qualifications of an IY Home Visiting Coach

It is recommended that an IY Home Visiting Coach has a background education in nursing, social work, counseling, psychology or psychiatry. *They must participate in the 2 day authorized IY Baby training program by an accredited IY mentor before doing this home visiting model.* It is also recommended that home visiting coaches attend the 1- to 2- day training specifically geared toward the Home Coaching Program.

NOTE: Home visiting coaches must have access to the full Incredible Years Parents and Babies Program set - which includes a comprehensive group leader's manual, the DVD set, and other supplemental items.



Preparing for Home Visits and Coaching

Before doing each home visit, the Home Visiting Coach prepares for the session by doing the following:

If parent is also participating in an IY parent baby group:

- Talk with the group leader to determine goals set by the parent. Make a copy of parents' goals.
- Find out about parents' success or difficulty with doing the weekly home activities and practicing the parenting concepts discussed in group sessions.
- Find out which vignettes have been shown to parents in group sessions and choose additional vignettes to show parents; review questions to ask when showing these vignettes and review practices/role plays to set up. See Incredible Years Baby Group Leader Manual (large purple colored binder) for questions and practice activities that go with each vignette. This manual is essential to delivering this cognitive and behavioral program at home.
- Choose home visit session protocol to be completed by home visiting coach (using this manual).

If parent will only be receiving the Home Coaching model (not attending group):

- Review video vignettes to be shown to the parent, along with questions to ask (these can be found in the Incredible Years Baby Group Leader's Manual).
- Plan for practice activities to be set up at home with parent(s) and baby.
- Review specific Home Visit Topic Protocol to be completed by Home Visiting Coach (using this manual).



The above picture shows the full "Parents and Babies" Program, which Home Visiting Coaches must have access to.

Materials Needed for Home visits

- Confirm that family has a working television and DVD player (or computer) for watching DVD vignettes, or bring a portable player or laptop computer.
- Extra toys (such as rattles, small hand puppets, soft baby books) for a practice session in case these are not available at home.
- The book *Incredible Babies: A Guide and Journal of Your Baby's First Year* (by Carolyn Webster-Stratton) for parents.
- *My Incredible Baby Journal of My Baby's First Year in My Family* (by Carolyn Webster-Stratton) for parents to record their observations.
- "The Incredible Years Parents and Babies Self-Administered Manual" for topic to be covered. **Make photocopies of the topic and handouts (home activities, brainstorm exercises, Points to Remember, Goals) for the parent to use.**
- DVD for home visit topic being covered.



NOTE: The Self-Administered Manual for parents is intended to be your own hard copy. Make photocopies of the materials for parents, so that you can re-use this manual for future home visits. Permission is given to those who purchase this manual set to make photocopies of materials solely for the purpose of providing the material to parents. If you prefer to provide the parents with the actual self administered manuals, you are welcome to purchase additional manual sets.



The Incredible Years® Home Visiting Coaching Training

Participants in this training have already attended training in the Incredible Years® Baby Parent Program and had the experience of running IY Baby parent groups. Everyone will be familiar with the content of the IY Baby Parent program and with the important collaborative processes or leader methods and processes.

This training session will focus on guidelines and processes for delivering the program as a Home Visiting Coach. You will be given the opportunity to practice delivering the program in role as a coach. You will also be given the opportunity to experience the program in role as a parent.

During the day we plan to practice some of the activities/vignettes from the following sessions:

Topic One: Introduction, Goals & Getting to Know Your Baby

Topic Two: Parents as Responsive Communicators and Babies as Intelligent Learners (3-6 months)

Topic Three: Providing Physical, Tactile and Visual Stimulation

Topic Four: Parents Learning to Read Babies' Minds

Topic Six: Babies' Emerging Sense of Self

We will base our practice on the following materials, which you will need to deliver the program as a home coach:

- Home Visiting Coaches Guidelines
- Self Study Video-Based Learning for Parents - Topics One through Six
- DVDs from the Baby Parent Program

You will be assigned a buddy for practice sessions. There will be opportunities to reflect on your experiences and to get feedback from others. Each pair will demonstrate how to show and the process the vignette at home, brainstorm ideas, set up practices and explain home activities. Parents will be encouraged to use their home manuals and buzzes to write their ideas and thoughts.

Typical Schedule for Home Visiting Coaching

- Review home activities and goals from the previous week
- Set agenda for the meeting and explain how new topic addresses goals
- Show chosen vignettes
- Complete practices/ buzzes/activities as detailed in Coach Guidelines for each session
- Review reading and home assignments with parents
- Summarise parent strengths
- Set goals for the week using self monitoring checklist
- Complete evaluation
- Set date for next visit

First Home Visit, Getting Started: Goals, Building Blocks, Program Structure

There are a number of activities below that will give a 'taster' of this session. Use the relevant pages from the 'Coach Guidelines' and 'Self Study Guides for Parents' to help you to practice delivering this session as a coach. Remember we are not aiming to cover the whole session.

In role as coach:

- ___ Buzz parent hopes and dreams for their babies in dyads
- ___ Practice goal setting in dyads & debrief (mentor/ trainer can demonstrate this first if needed)
- ___ Review the Building Blocks poster and program structure
- ___ Practice in dyads explaining IY building blocks & debrief

Handouts: Baby Building Blocks handout



Getting Started

1

Establishing Goals & Relationship

Coach Objectives for First Home Visit:

- Develop a positive connection with the family.
- Learn more about the family including who lives in the home and any family problems such as drug abuse, unemployment, depression, sleep deprivation, marital difficulties, or other parenting difficulties with other children.
- Understand parents' goals for themselves and their baby (hopes and wishes). Find out how family is adjusting to new baby, sleep and feeding approach.
- Explain the Incredible Years® baby parenting program and philosophy and its relevance for helping parents achieve their goals. (Show and explain IY Baby Building Blocks™, if this hasn't already been done in group setting.)
- Show first vignette of first topic regarding the meaning of a baby's crying and help parents understand how to cope with baby's crying and fussy periods.
- In second session show additional selected vignettes from this topic.
- Evaluate parents' level of support and encourage parents to get rest and support from others.
- Support and promote breast feeding when possible.

Developing a positive connection with the family

Developing a positive connection with the family will occur throughout the home visit. It will begin with introducing yourself and continue as you ask questions and listen empathically to parents' experiences and concerns. Home visiting coaches will be accepting, nonjudgmental, and collaborative with parents. They will reinforce parents for their positive ideas and behaviors and their attempts to provide nurturing parenting. If the coach is also working with the parents in the parent baby group, then he/she may already have a relationship with the parents and know the family background. If so, less time can be spent on this initial stage, and the discussion can move quickly to reviewing the parents' goals. **If the coach is meeting the family for the first time, then this rapport building and information gathering is very important. In this case, this will comprise the bulk of the first hour with these parents.**

Learn about the parents' concerns and goals for their baby

Coach begins by asking open-ended questions to allow the parent(s) to tell their story about their family and baby. A typical first question might be "Tell me more about what life is like with your baby." As the parents talk about their baby, follow up with further questions to clarify and ask them what their hopes/goals are for their baby. Show genuine interest in what parents are telling you. Actively listen to what they say.

Child Problems: If a parent begins to talk about a problem with their baby they are concerned about, ask the parent to elaborate further. In doing so, the parent is encouraged to tell about specific times the problem occurs. If a parent says “He is crying constantly!” the home visiting coach might reply “Tell me more about this and how you and your partners are coping with that.”

Getting parents to focus on specific incidents gives the message that coaches are listening and are trying to understand their situation. As parents tell the coach more about the incident, the coach continues to ask focused questions which encourages the parent to talk further about their thoughts, feelings and behavioral responses (e.g. “How does your husband respond when your baby cries like that?” “What support do you have when this happens?”).

Baby Development: As important as it is to learn about the problems a parent is facing with their baby, it is also important to learn about the baby’s temperament and development. By asking about times the baby is sleeping or relaxed, their emotional responses and level of support, or things that comfort the baby (e.g, rocking, being bathed or breast fed) home visiting coaches are emphasizing the positive things the parents have done and can praise their approaches and efforts to get to know their baby and his/her temperamental style.

Goal Setting: Once a coach has a good understanding of the baby and how the parents interact with him or her, it is helpful to ask parents what specific goals they have for themselves as parents as well as their hopes and dreams for their child. Parents who are already participating in the IY group will have discussed these goals in the first group session. In this case, the home visiting coach can review these goals with parents (see goal sheets) and make sure these are still the goals parents want to work on. **Parents who aren’t attending the group should be given the Parents Thinking like Scientists goal sheets and asked to complete it.** For each goal, the coach helps the parents describe what they would like to happen in concrete, observable ways (e.g. “My baby needs to sleep longer or breast feed less.”). Some parents may have unrealistic or developmentally inappropriate expectations for their babies and their lives. In addition to thinking of goals for their babies, parents are also encouraged to think of a goal for themselves (e.g. “I want to have an hour away from my baby to go to yoga”). Parents are encouraged to come up with realistic goals for themselves.

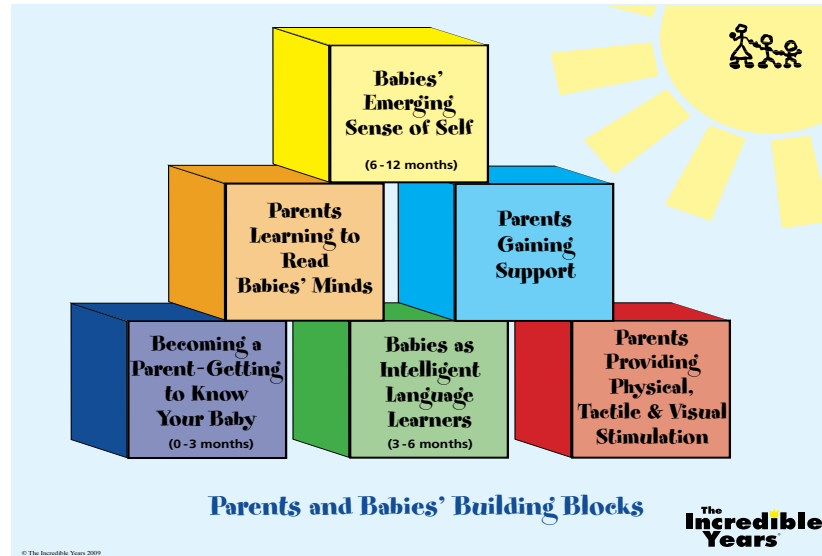


NOTE: Coaches may want to use the *Incredible Years Babies Program Survey* may be used to help parents with goal setting.



Review the Goals for the Home Visits—Overview Baby Building Blocks™

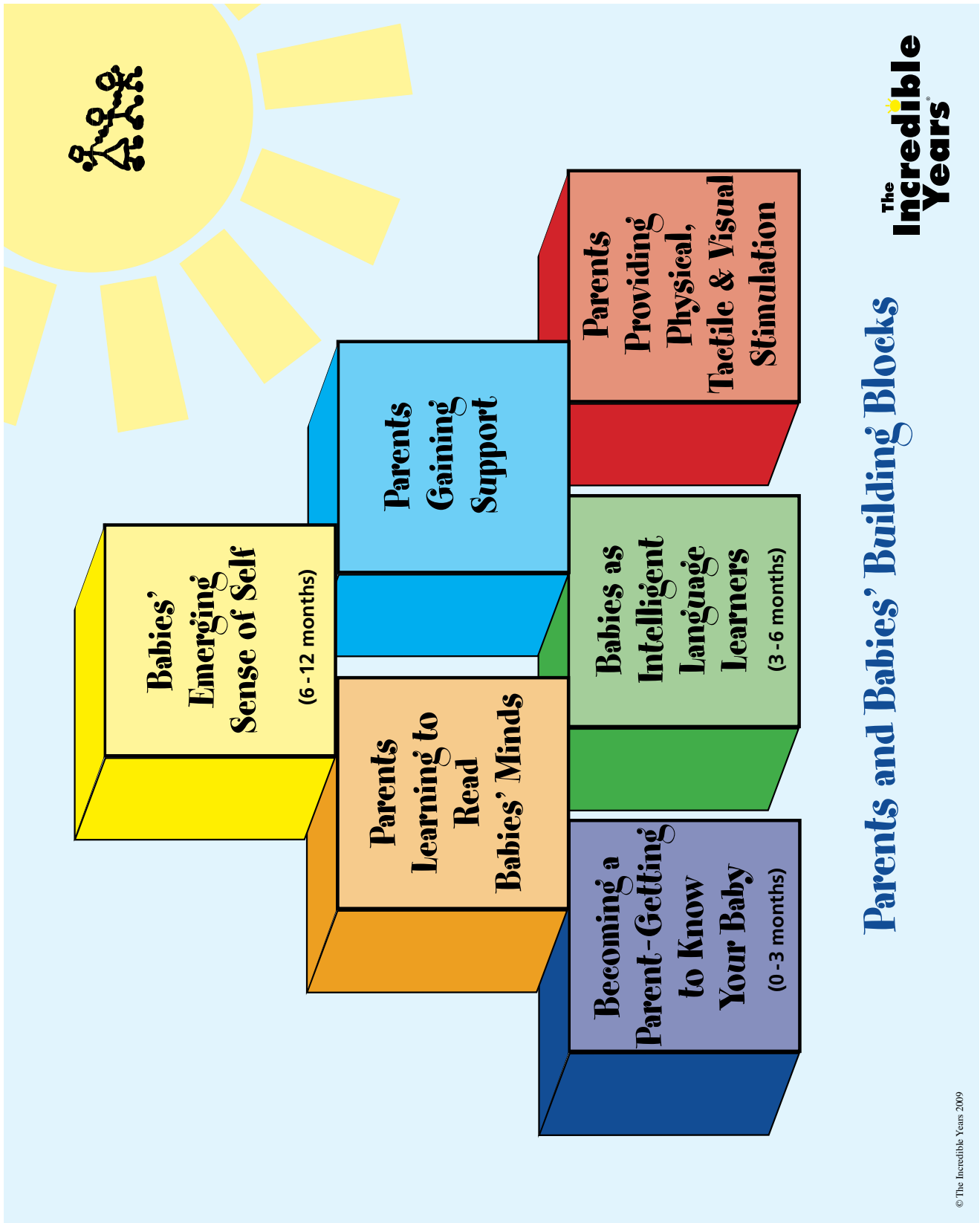
Next, the home visiting coach explains how the IY program is designed to address some or all of the goals parents listed. For parents involved in the IY group, this will be a brief discussion and parents will have a chance to ask any further questions about the program philosophy and how the program addresses their goals. For parents not involved in the group, the coach will show them the Building Blocks handout (in first parent manual) and will explain the program philosophy, topics and how they address each aspect of their goals. For example, “The first topic we will discuss today is getting to know your baby. This skill will help you with your goal to develop a strong attachment to your baby. You will be learning ways to manage crying, communicate with your baby, and understand your baby’s development in order to help build his/her emotional development.”



Explain the Home Visit Methods

After this discussion about IY baby program topics, the coach reviews the ways the parents will be learning together during these home visits. First, the coach explains that s/he will show some video vignettes of babies and parents interacting. Parents will discuss what is effective and what they might do differently from what they see in the vignettes. Parents also participating in the IY group will be shown one or two extra vignettes on the same topics as those they saw in their recent group sessions. Parents who are not in the IY group will be shown more vignettes. These parents will need more time to cover the material, probably at least two sessions for each topic. After a video vignette is shown, coaches encourage parents to comment on their ideas, ask questions, consider different approaches they would take, and think about what the benefits are for their babies by taking a particular approach. Examples of these questions are found in the IY Parents and Babies leader’s manual. Coaches will help parents understand developmentally appropriate behavior and milestones for babies’ development. For example, “babies need to cry, it is their only way to let you know they need something.” Or, “most babies don’t have 5-6 hour sleeping patterns until they are 3-4 months old.”

Subsequent to this discussion of the video vignette, the coach sets up a practice of the specific skill for parents to practice with their baby. For example, after seeing the vignette of the crying baby, ask the parent to think about their responses and how they will decide if this cry is because of hunger, illness, a messy diaper or a need for stimulation. The coach is positive and supports parents’ thoughts and efforts and may model some additional strategies as needed.



Home Visit Topic One: Getting to Know Your Baby

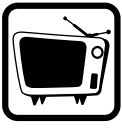
Mediating Vignettes

There are a number of activities below that will give a ‘taster’ of this session. Use the relevant pages from the ‘Coach Guidelines’ and ‘Self Study Guides for Parents’ to help you to practice delivering this session as a coach. Remember we are not aiming to cover the whole session.

In role as coach:

1. Show Baby Program Part One, Vignette #8: Getting Sleep and Support (First Topic)
2. Practice mediating in dyads & debrief
3. Practice building parent support network using Parent Support Network handout in dyads and debrief

Handouts for Parents: Parent Support Network, Parents Thinking Like Scientists, Babies’ Brain Development



Vignette 8

Getting Sleep and Support

Father: I gotta go into work tomorrow in the morning for a few hours. So, um, if we get to bed early enough I might be able to help with the night feeding. But if we get to bed late, it might be nice if you could maybe do the 2am feeding or maybe the 6am. Or one of those.

Mother: Of course. Of course.

Father: It's good that I didn't have to get up. I had the day off.

Mother: It's amazing what an extra just like hour, hour and a half of just laying about can do for you. Somebody isn't letting mommy and daddy sleep like they used to.

Father: It's not so bad if I go to bed at nine. If I go to bed at nine, then I can up for a few hours in the night and still be alive and be able to go to work. But if we stay up to eleven like we used to, then we end up with only 5 hours of sleep total.

Mother: Can you imagine working on a show right now?

Father: Oh, no, man. He gives you breaks, but he doesn't let you schedule them. He schedules when you get to go on break from - from him. Other than that he's a full time job. You always got to be ready to take care of him.

Mother: Um hm. Well, Maybe mom can give us a break this weekend. Sunday, or she'll - I know she'll definitely be back by Tuesday, because it's Halloween.

Father: Oh, right.

Mother: Maybe we can actually get out for dinner or something.

Father: That would be nice.

Pause in scene



Questions to Facilitate Discussion

1. How often are you up at night with your baby?
2. How have you adjusted your routine to get more sleep or naps?

Vignette continues next page

Vignette continues

- Mother:** You can stay with grandma? So what's your schedule like next week for work?
- Father:** Uh, pretty busy. I think I'm gonna be in the studio probably pretty late and pretty early every day. I think that big project I'm working on is starting to ramp up so, so I might need your help at night more - more so than last week.
- Mother:** Okay. I can do that. But I do have a couple posters.
- Father:** You got work to do too.
- Mother:** Of course. Yeah. So...When will you home in the evenings?
- Father:** By seven. So I could watch him for a few hours before I go to bed.
- Mother:** Okay. Umm. Hmm... Well, mom will back on Tuesday, so
- Mother:** I'll sort it out between she and I.
- Father:** It's tough that you have to work from home and also take care of the baby at the same time.
- Mother:** I know. That's what the girls at work said. They said it's nice to work from home, but there will come a point when you're gonna need a break, when you're not gonna get any work done. I think I know what they're talking about now.
- Mother:** I would miss him so much.

**Questions to Facilitate Discussion**

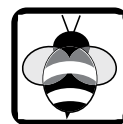
1. How do you get enough sleep?
2. Do you have anyone else who can help you with night feedings or cover so you can sleep during the day?
3. Are you trying to work from home, if so, how do you manage your schedule?

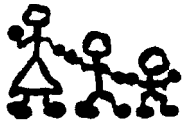
**Considerations**

Because babies are being fed or changed every couple of hours, parents cannot get a full cycle of sleep. It will be important for them to take naps when the baby naps and try to get as much rest as possible.

Buzz

Pair up parents to share how they can get extra sleep and who might provide them with backup support if needed.





First Topic

1

Getting to Know Your Baby

Coach Objectives for First/Second Home Visit:

- Review parents' experiences observing and reading their babies' cues and signals and how they respond to crying and fussy periods.
- Support parents' baby-led breast feeding as recommended milk for most babies in the first 6 months.
- Help parents understand the importance of getting rest and support and shifting priorities.
- Help parents know when baby is sick and when to call the doctor.
- Teach parents (as needed) about soft spots, baby acne, sleep habits, spitting and normal bowel movements.
- Encourage parents to think about baby-proofing and baby safety (crib and car seat safety) and how baby sleeps.
- Encourage parents' own learning from their babies and build their self-confidence.

The coach asks the parents what they believe to be the benefits of being responsive to their baby's crying. Help them understand that being a responsive and nurturing parent for a baby this age is not reinforcing crying behavior but rather a way to build a positive relationship with their baby and help the baby learn they are in a safe environment. The coach can let parents know when their baby is older (5-6 months) and more developmentally mature, they will help the parents to support their baby to sleep for longer periods if s/he continues to be awake often at night.

Starting the Discussion

Before showing the first vignette, talk about the parents' week. Try to gauge their fatigue levels and support system. Consider some of the following questions.



Suggested Questions to Ask:

1. What do you think your baby needs most from you?
2. What are your hopes and wishes for your baby (long range goals)?
3. Do you have any concerns you want to talk about (make a list)?
4. Are you breast feeding or bottle feeding? How is this going? How often?
5. How is your family adjusting to your new family member?
6. How much sleep are you getting now? Can you take naps when your baby sleeps?
7. Do you feel you have enough support? Start to complete support handout and continue with subsequent visits.
8. How often does your baby cry? Do you think you can soothe or calm your baby?

Topic #1: Getting to Know Your Baby

A. Prepare Video Vignettes for First Two Home Visits

If you are coaching parents who are also participating in IY groups: check with group leaders regarding which vignettes parents have covered in the group. Choose several additional vignettes related to the topic they have been covering according to specific needs of parents.

If you are coaching parents who are not participating in an IY group: plan to show starred vignettes over two to three home visits. Choose additional vignettes according to parent goals. Also plan to do several practice activities. (See Incredible Years Parents and Babies Leader's manual for questions to ask related to each vignette.) For these parents the first visit and first topic can be divided into at least two home visits in order to complete all the material. The first visit will focus on parents' goals, explanation of the IY program and home activities and also showing the first vignette. The second visit will focus on some of the remaining vignettes and baby-directed practice exercises. See the large purple Parents and Babies Leader's Manual for questions to ask related to each vignette in the first topic.



B. Show Topic One Vignettes: Parents Getting to Know Your Baby (First Three Months)

The topic includes the following vignettes:

Introductory Narration*: Getting to Know Your Baby

Vignette 1A*: Understanding the Meaning of a Baby's Cry (*Safety Alerts for cribs & never leave baby alone on changing table*)

Vignette 1B*: Crying and its Meaning (*Parent shares feelings regarding their baby's crying & discuss importance of cuddling and rocking*)

Vignette 2: Deciding Whether Your Baby is Sick (*Temperatures to worry about & when to call doctor*)

Vignette 3: Parent Worries (*Understanding normal skin bumps, BMs, soft spots, baby position for sleeping*)

Vignette 4: Feeding, Burping and Crying (*Burping*)

Vignette 5*: Observing and Getting to Know Your Baby

Vignette 6: Communicating with Babies (*Practice holding baby facing parent standing or on parent's stomach*)

Vignette 7: Feeding, Burping, Coping (*Tips to Keeping Milk Down*)

Vignette 8*: Getting Sleep and Support (*Determining who can provide back up support*)

Vignette 9: Shifting Priorities and Gaining Confidence

Vignette 10*: Deciding on Baby's Activity Needs (*Newborn sleep habits*)

Vignette 11: Diaper Changing (*Information about bowel movements*)

Vignette 12*: The Bouncy Chair (*Babies likes and dislikes & Safety Alert re chair*)

Vignette 13*: Amount of Stimulation

Vignette 14*: Fevers and Doctors

Summary Narration*: Parents Learning to Communicate with Babies





C. Practice: Getting to Know Your Baby

If baby cries during home visit, coach helps parents stay calm and provide nurturing, cuddling responses after checking hunger needs and diaper status. Check baby's bedroom and bed to be sure it is safety proofed and parents have everything easily accessible. Coach can model nurturing playful interactions and communication with baby and when needed also prompt the parent with some ideas of what to say or do. Or, coach can just encourage the parent to watch what their baby is doing and how s/he is responding to their parenting interactions.



D. Typical Day & "Things I Can Do!" Checklist

Ask parents to do "Things I Can Do!" checklist and fill out the Typical Day handout during the week. The Things I Can Do Checklist can be found in the Self Administered Manuals or at the end of the first chapter of the *Incredible Babies* book.



E. Home Activities Assignment

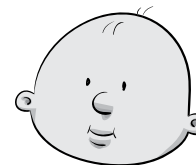
Coach explains home activities for the next week, reviews parent handouts and key Points to Remember with parents. Give parents the self-administered baby manual (photo copies) for these handouts and assignments (or, they can use the handouts included in their *Incredible Babies* book). Help parents set a personal goal for themselves for what is realistic and record on Self-Monitoring Checklist. Set a date for the next home visit.





HOME VISIT CHECKLIST

Topic One



Topic: Introduction, Goals, & Getting to Know Your Baby

Vignettes: Part 1: 1–13

DATE(S): _____

PARENT NAME(S): _____

COACH NAME: _____

VIGNETTES COVERED: Part 1:

Intro* 1A* 1B* 2 3 4 5* 6 7 8* 9 10* 11 12*
 13* 14*

Summary*

(Circle vignettes shown.) (* = recommended vignette)

DID I

YES

NO

- | | | |
|---|-------|-------|
| 1. Develop a positive connection with parents and other family members? | _____ | _____ |
| 2. Ask about parents' concerns and goals (hopes, dreams, difficulties & worries)? | _____ | _____ |
| 3. Explain IY baby program philosophy? (Refer also to baby brain development handout) | _____ | _____ |
| 4. Talk about home visit schedule and plan? | _____ | _____ |
| 5. Brainstorm benefits of communicating with babies? | _____ | _____ |
| 6. Explore parents' feelings regarding crying? | _____ | _____ |
| 7. Explore the importance of getting rest and support? (Evaluated level of support?) | _____ | _____ |
| 8. Discuss baby's likes/dislikes? | _____ | _____ |
| 9. Practice with baby observing how s/he responds to parents' voices, actions and/or objects? | _____ | _____ |
| 10. Discuss baby's feeding & burping, sleep patterns, bowel movements, skin, fontanel (soft spots), and activity needs (<i>circle those covered</i>)? | _____ | _____ |
| 11. Review safety alerts/crib & car safety/when & how baby sleeps? | _____ | _____ |
| 12. Explain importance of home activities for week (typical day and journal discoveries, Points to Remember, "things I can do" handout, reading)? | _____ | _____ |
| 13. Plan with parent the week's home activity, priorities, and goals (self-monitoring checklist)? | _____ | _____ |

Xerox*:

**Most handouts can be found in BOTH the Self Administered Manual and the “Incredible Babies” book.*

Home Activities for the Week – Getting to Know Your Baby (find in Self Admin. Manual)

Create a Baby Journal

A Typical Day handout

Things I Can Do (0-3 months) Developmental Milestones

Points to Remember: Getting to Know Your Baby

Points to Remember: Take Care of Yourself

Points to Remember: Coping with Crying

Points to Remember: Keeping My Sleeping Baby Safe

Parents Thinking Like Scientists

Baby Home Survey (pre test)

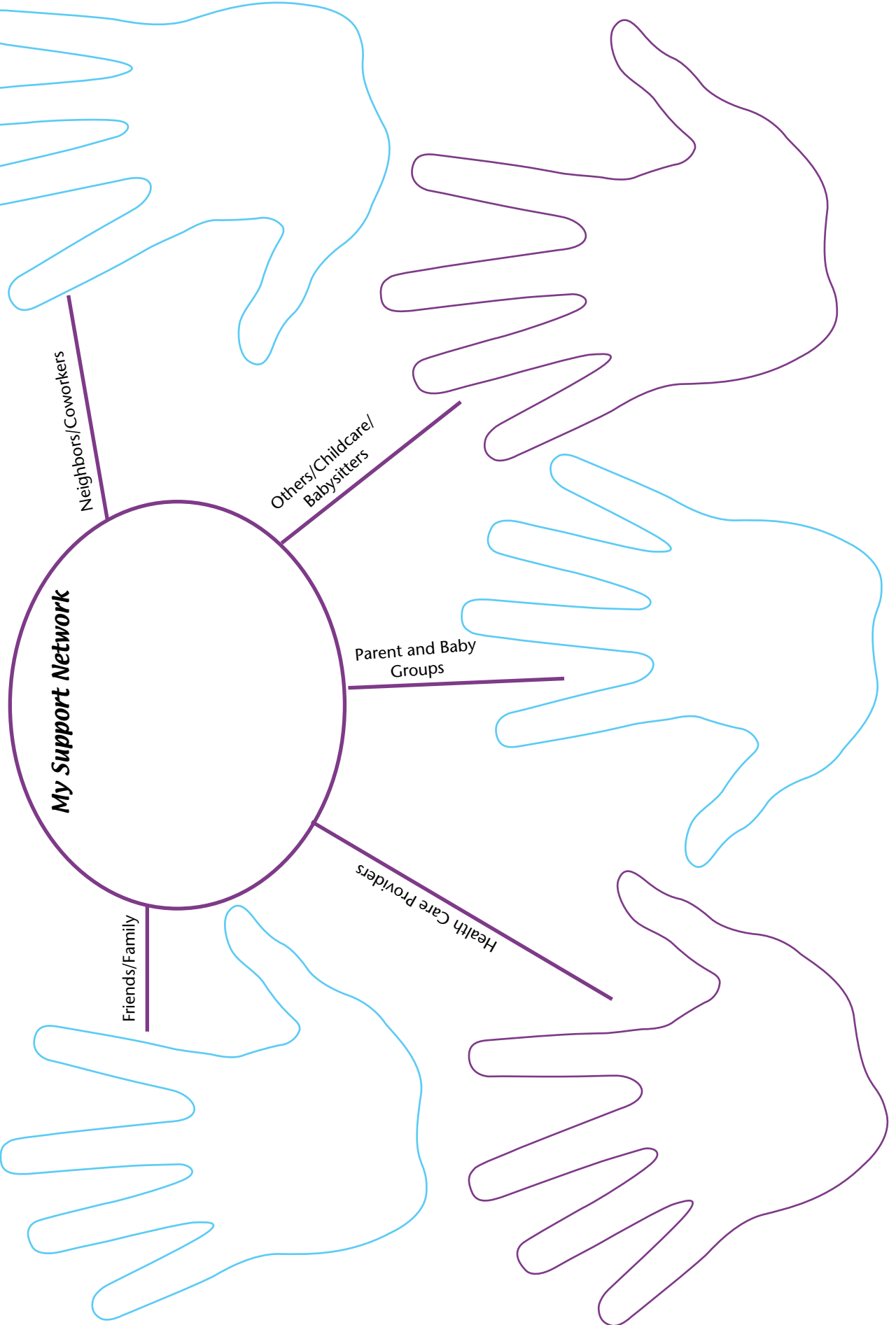
Self-Evaluation

“Gems” of Session—Reminder of things to pursue next session

Parent Support Network

Who can lend a helping hand?

Think about people in your support network. Each hand represents a different group of people. Write in each hand specific people from that network who can help provide support to you and your baby! You can draw or paste a picture of your family in the "My Support Network" circle! Come back to this handout throughout the duration of the course.





Incredible Years Buzz!



Incredible Babies: Coaching Summary

I can read
my baby's
mind



www.incredibleyears.com

Summary of Session

What we've accomplished!

Parent Goals Addressed

Getting to Know Your Baby

Developing a Support Team

Attending to Self-Care & Getting Enough Rest

Calming Babies & Coping with Crying

Baby-Led Feeding

Baby Sleep Routine

Speaking "Parent-ese" & Singing

"Things I Can Do" Handout Review

Physical, Tactile & Visual Stimulation

Reading to Baby

Baby Massage & Exercise

Reciprocal Play Interactions

Temperament Questionnaire

Baby-Proofing Safety

First Foods

Principles

Goals and Activities

The
**Incredible
Years**

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Parents Thinking Like Scientists



Baby or Parent
Concerns

Baby or Parent
Strengths

Goals

Strategies	Benefits	Obstacles [thoughts, feelings, behavior in self & others]
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Ongoing Plans

Parents Thinking Like Scientists



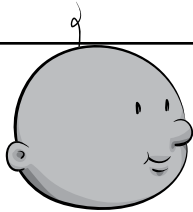
Goals

Baby or Parent
Concerns



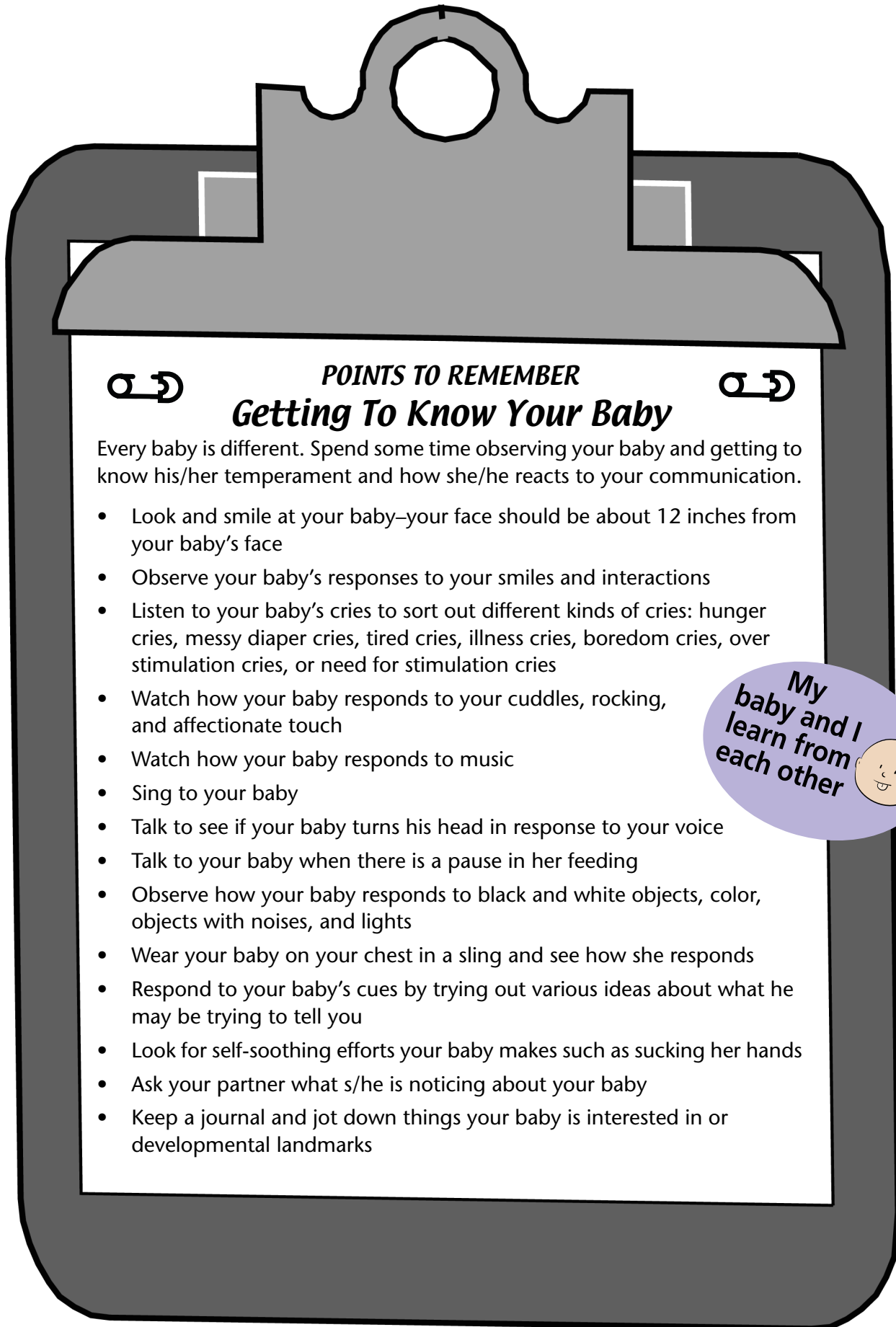
Baby or Parent
Strengths





Things I Can Do (0-3 months)

Activity	Date/Check	Observations/Comments
I follow objects with my eyes		
I do gurgles, oohs and ahs		
I smile and laugh and squeal		
I found my hands today		
I look at my parent's face		
I have a favorite toy or activity		
I can recognize my parent's voice		
I can hold my head up in shorter period of times		
I sit in a wobbly way but need support		
I know my name		
I can say baba		
I like being read to		
I react when you are happy		
I love to be sung to		
I am imitating sounds		
I know when it is not you taking care of me		
I love to explore with my mouth		



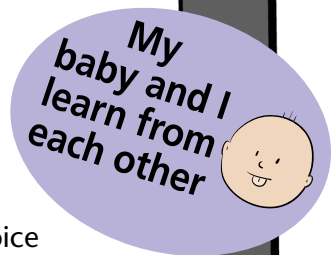
POINTS TO REMEMBER



Getting To Know Your Baby

Every baby is different. Spend some time observing your baby and getting to know his/her temperament and how she/he reacts to your communication.

- Look and smile at your baby—your face should be about 12 inches from your baby’s face
- Observe your baby’s responses to your smiles and interactions
- Listen to your baby’s cries to sort out different kinds of cries: hunger cries, messy diaper cries, tired cries, illness cries, boredom cries, over stimulation cries, or need for stimulation cries
- Watch how your baby responds to your cuddles, rocking, and affectionate touch
- Watch how your baby responds to music
- Sing to your baby
- Talk to see if your baby turns his head in response to your voice
- Talk to your baby when there is a pause in her feeding
- Observe how your baby responds to black and white objects, color, objects with noises, and lights
- Wear your baby on your chest in a sling and see how she responds
- Respond to your baby’s cues by trying out various ideas about what he may be trying to tell you
- Look for self-soothing efforts your baby makes such as sucking her hands
- Ask your partner what s/he is noticing about your baby
- Keep a journal and jot down things your baby is interested in or developmental landmarks





POINTS TO REMEMBER

Take Care of Yourself

- Get as much rest as possible
- Take naps—try to sleep when your baby sleeps
- Give yourself a break—ask someone to watch your baby so you can nap
- Do something nice for yourself such take a long bubble bath or walk with a friend
- Share your joys and difficulties with another parent
- Tell yourself you are doing a good job learning from your baby
- Keep a log of the fun moments
- Don't worry about a messy house or making fancy meals
- Accept a meal from a friend
- Use take-out for a special treat
- Keep life simple
- When you are breast feeding successfully, you can think about expressing a bottle of milk from time to time so that a partner or babysitter can take over the feeding when you need a break.

**I'm
keeping
life
simple**



Write your own favorite self-care activities here:





POINTS TO REMEMBER
Coping With Crying

If you know your baby's hunger and diaper/nappy needs have been met and you've tried to soothe and cuddle your baby but she is still crying and inconsolable, it's time to take care of yourself so you don't get too frustrated. Take a few minutes to calm yourself.

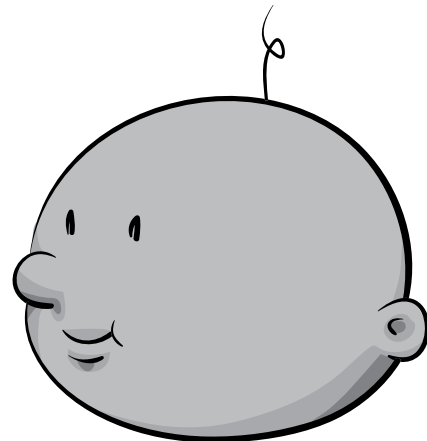
- Put your baby in a safe place and let her cry for a few minutes

Stay nearby, but calm yourself:

- Put on quiet music to distract yourself
- Take deep breaths
- Remind yourself nothing is wrong with your baby—crying is normal and is her release as well as how she organizes herself
- Tell yourself, "It will get better in a few months"
- Tell yourself "I can cope with this"
- Don't take your frustration out on your baby by shaking her; you might hurt her and make her feel unsafe because she cannot understand your reaction.
- Call someone for help if you feel your frustration building
- Remember the crying or fussy period will usually end in 1–2 hours

After a few minutes of relaxing, go back in to your baby and rock and soothe your baby for a while, then put her down and repeat the above. Usually you won't have to do this more than 3 or 4 times before your baby has calmed down.

I help
my baby
feel secure
and safe



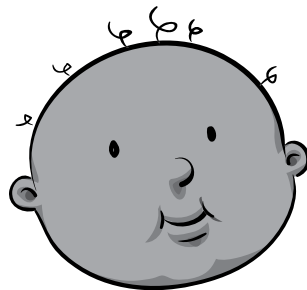


POINTS TO REMEMBER

Keeping My Sleeping Baby Safe

- Put baby to sleep on his/her back
- Be sure there are no blankets, pillows, stuffed toys or bumper pads in the crib/cot
- Be sure your baby's mattress is firm, tight fitting and has a fitted sheet
- Check that bassinet or portable crib meets approved government safety standards
- It is recommended that your baby sleep in the same room as you for the first 6 months. You can put your baby's sleep crib close to your bed. This is much safer than bed sharing (which is not recommended) and will make it easier for you to feed, comfort and watch your baby.
- Only bring your baby into your bed to feed or comfort and then return to put on back in his/her separate sleep space when you are ready to go to sleep. This is recommended for at least the first 6 months to reduce risk of Sudden Infant Death Syndrome (SIDS)
- Consider offering a pacifier/dummy at the start of nap time and bedtime
- Be sure there is no smoking in your baby's bedroom
- Never sleep with a baby on a sofa or arm chair; if you fall asleep when cuddling be sure to return baby to his/her bed
- Don't let your baby get too hot or cold

Note: Avoid too tight swaddling as this may overheat your baby and restrict your baby's natural movement and comfort. Modern safe swaddling calls for freedom of the legs and hips to avoid risk to hips.



Home Visit Topic Two: Babies as Intelligent Language Learners

Coaching Parent-Baby Activities

There are a number of activities below that will give a 'taster' of this session. Use the relevant pages from the 'Coach Guidelines' and 'Self Study Guides for Parents' to help you to practice delivering this session as a coach. Remember we are not aiming to cover the whole session.

In role as coach:

1. Show Baby Program: Part 2, Vignette #2: Bathing Your Child in Language – Speaking Parent-ese
2. Practice mediating in dyads
3. Debrief key principles of speaking Parent-ese
4. Break up into dyads to practice coaching a parents' speaking parent-ese with babies & debrief

Handouts for Parents: Self-Monitoring Checklist, Home Activities, Refrigerator Notes, Things I Can Do



Vignette 2

Bathing Your Child in Language-Speaking “Parent-ese”

Mother: Yeah, yeah. Bicycle, bicycle, bicycle. Bicycle bicycle, bicycle. Yeah. Are those hands good? Yeah? Are you kicking? Can you kick? Are you gonna eat the foot? Yeah, yeah, are you're gonna eat your foot. Do you wanna sit up? Oh, there you go. Look at you! Yea. Look at you sitting up. Yea. Look at you sitting up. There's your book. Woah! You fell over! Up you go. Do you wanna play with your new kangaroo? Yea. Can you do it? Can you do it? You gonna kick. Yeah. Look at you. Can you kick it? Can you do it? Ahhh grr. Yeah, you wanna lie there for a second? You got your toes. Yeah, you got your toe in your hand? Stretching out. Oh, big long stretch. Kick, kick and push. Are you pushing? Yeah. Are you pushing? There's your toe. There's your toe. Yeah. Let's see your tongue. Can you do your tongue? Kick, kick, kick. Kick, kick, kick. Kick, kick, kick. Yeah, yeah. How about sitting up again. Let's see you sit up. Try again. Oh, you're so strong. Look at you! Look at you do it. Can you do it all by yourself. Let's see. You're doing it! Yeah. Yeah. What a big boy.



Questions to Facilitate Discussion

1. What is important about the distance this mother places between herself and her baby?
2. How does she talk to her baby? (discuss the qualities of parent-ese)
3. How does she mirror her baby's responses? Why is this important?
4. What language skills is she encouraging with her commenting?
5. How is she helping her baby to feel safe?
6. How is she helping her baby with physical development?
7. Do you think there is value in reading to babies?



Practice with Babies

Review handout on parent-ese and ask parents to practice speaking parent-ese to their babies and watch how their babies respond.

Considerations

This mother is teaching her son the names of his body parts by naming them when she touches him and she is interacting with him in a coordinated way. She says something and then waits for his response and then she responds again. She not only is facilitating language development, but when she positions him sitting, she is helping him develop the muscles he needs to sit. He is still pretty unbalanced, but she helps him gain stability by bending his legs so he has a wider base.

“Parent-ese” is a universal parent language that babies love (see handout). It is language which is melodious, high pitched, spoken slowly with pauses, clearly articulated, uses repetition, and exaggerated facial expressions.

In the first six months parents should read nursery rhymes and sing songs—show their baby books with bold color, or black and white pictures.

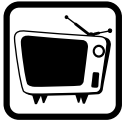
Home Visit Topic Three: Physical, Visual, and Tactile Stimulation

There are a number of activities below that will give a 'taster' of this session. Use the relevant pages from the 'Coach Guidelines' and 'Self Study Guides for Parents' to help you to practice delivering this session as a coach. Remember we are not aiming to cover the whole session.

In role as coach:

1. Show Baby Program: Part 3, Vignette 11: "Reading to babies"
2. Set up a reading practice between parent and baby

Handout for Parents: Home Activities, Refrigerator Notes, Calling Your Buddy Handout, Baby Alerts, and Baby Journal handout.



Vignette 11

Reading to Babies

- Mother:** Wanna see the book?
- Grandma:** Oh, see.
- Mother:** One, two, three.
- Grandma:** A donkey named Eeyore, his friend and Kanga and little Roo.
- Mother:** Look Mari.
- Grandma:** Oh, she made that song up.
- Mother:** Oh, I think she made it from the end here.
- Grandma:** Oh, there we go.
- Mother:** I'm just a little black rain cloud. You want to see the book Mari? Yeah she's calm. Very calm baby.
- Grandma:** She is.



Questions to Facilitate Discussion

1. Do you read to your baby? Does your baby enjoy this?
2. How is this mother providing several sources of comfort to her baby?

Considerations

Reading to babies provides both visual stimulation as well as the language stimulation we talked about earlier. There is some research to suggest that babies and toddlers who are read to on a daily basis will have longer attention spans. When parents read aloud to babies they are repeating words and phrases, describing and talking about the pictures. Babies are actually capable of intense concentration—more than older children—perhaps because they are so focused on observing as infants. Use the “parent-ese” voice methods—this will hold a baby’s attention for 15 minutes or more!

Reading aloud is one of the easiest and most relaxing things parents can do with their baby. It promotes a feeling of togetherness or bonding and it enhances the baby’s language development.



Practice with Babies

Parents practice reading to their babies using cloth books babies can touch and taste.





Third Topic

3

Providing Physical, Tactile, and Visual Stimulation For Your Baby

Coach Objectives for Home Visit:

- Review experiences since last visit and give positive feedback regarding parents' efforts to complete home activities. Discuss their areas of concern or difficulty with speaking parent-ese or singing, or finding time to rest. Review anything new on their "Things I Can Do" baby checklist.
- Show selected vignettes from Topic Three and help parents understand the importance of physical and tactile stimulation for their baby's brain development. Teach some baby games.
- Teach parents how to do a baby massage.
- Help parents understand how to involve siblings and other family members in their baby's play times.
- Help parents understand the importance of assessing the amount of stimulation a baby receives.
- Review ways to keep babies safe during bath times and other activities.
- Review the "modeling principle."
- Help parents understand how temperament of baby affects their play interactions.
- Encourage parents' good baby play interaction skills so they feel confident.

Review Prior Session Home Activities

Coach begins this session by reviewing how speaking parent-ese and singing went during the previous week. Coach asks about any problems or difficulties that occurred and talks about ways to handle these. Coach and parents brainstorm barriers to speaking parent-ese during play with their baby.



Suggested Questions to Ask:

1. How are you taking care of yourself (and getting enough rest)?
2. How are you coping with your baby's crying?
3. How is it to speak "parent-ese" with your baby?
4. Do you feel awkward speaking this way (or singing) to your baby in front of others?
5. What was your baby's response when you talk with him/her this way?
6. Have you noticed any mirroring or modeling on the part of your baby?
7. Have you tried imitating your baby's actions or sounds? What happened?
8. What kind of physical exercises do you do with your baby?

Topic #3: Providing Physical, Tactile, and Visual Stimulation

A. Prepare Video Vignettes

If you are coaching parents who are also participating in IY groups: check with group leaders regarding which vignettes parents have covered in the group. Choose several additional vignettes related to the topic they have been covering according to specific needs of parents.



If you are coaching parents who are not participating in an IY group: plan to show starred vignettes over two to three home visits. Also plan to do several practice activities. (See Incredible Years Parents and Babies leader's manual for questions to ask related to each vignette.)

B. Show Topic Three Vignettes: Providing Physical, Tactile, and Visual Stimulation for Your Baby

Introduce benefits of physical, tactile and visual stimulation for a baby's brain development. The topic includes the following vignettes:



Introductory Narration*

Vignette 1*: Bathing and Massaging Your Baby (*pull out how parent keeps baby safe during bath time as well as language and physical stimulation*)

Vignette 2*: Baby Aerobics (*tummy time, arm and leg exercises; practice massage or exercises*)

Vignette 3*: Tummy Time and Head Lifts

Vignette 4*: Walking Time (*safety alert - keeping small objects, keys, coins, nuts out of reach of baby, discuss praise for babies*)

Vignette 5*: Cycling lessons (*involving siblings*)

Vignette 6*: Sitting Time to Explore (*review modeling and practice sitting position to explore*)

Vignette 7: Pull Ups (*showing baby joy and affection*)

Vignette 8: Arm Exercises (*practice peek-a-boo*)

Vignette 9*: Providing Visual Stimulation

Vignette 10*: Floor Time (*practice physical exercises or visual stimulation ideas; review baby alert regarding safety*)

Vignette 11*: Reading to Babies (*practice reading to baby with soft book*)

Vignette 12*: Giving Your Baby a Lift

Vignette 13: Spider Game

Vignette 14: Mirror Mirror on the Wall (*saying baby's name*)

Vignette 15*: Hugging and Rattle Play (*baby's favorite toy*)

Vignette 16: Involving Siblings in Baby Play (*share games to play with baby*)





C. Brainstorm/Buzz

Brainstorm with parents physical activities and physical and tactile stimulation they can provide for their baby. The Coach also works with parents to brainstorm a list of things they can do to keep their baby safe.



D. Practice: Baby Aerobics

During the first home visit on this topic, coach sets up a play exercise where parents play with their baby and practice using physical exercises such as cycling lessons, tummy time, massages, head lifts and sit up time to explore. Coach helps parents identify the exercises they want to focus on first. Coach helps parents learn to combine speaking parent-ese and/or singing with these exercises.

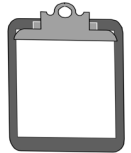


E. Practice: Reading with Baby

During the second home visit on this topic, coach sets up a practice exercise where parents read to their baby. The refrigerator note for reading with your baby can be used to prepare for this practice. (Also refer to page 98 in the *Incredible Babies* book.)

F. Review Handouts

Review baby safety during baths and safety alert handouts. (Also refer to page 100 in the *Incredible Babies* book.)



G. Home Activities Assignment

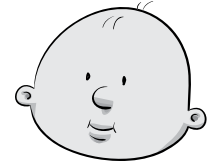
Coach explains home activities for the next week (include reading assignment) and reviews key Points to Remember. Help parents set a personal goal for themselves on their self-monitoring checklist. Set a date for the next home visit.





HOME VISIT CHECKLIST

Topic Three



Topic: Providing Physical, Tactile, and Visual Stimulation

Vignettes: Part 3: 1–16

DATE(S): _____

PARENT NAME(S): _____

COACH NAME: _____

VIGNETTES COVERED: Part 3:

1* 2* 3* 4* 5* 6* 7 8 9* 10* 11* 12* 13
 14 15* 16

(Circle vignettes shown.) (* = recommended vignette)

DID I	YES	NO
1. Review experiences since last visit and home activities (speaking parent-ese, singing, reading to baby, support system)?	_____	_____
2. Review safety alerts and baby proofing efforts (car seat, not using walkers, no bottle in bed)?	_____	_____
3. Discuss physical, tactile and visual stimulation provided for baby and its importance for baby’s brain development?	_____	_____
4. Review’s baby’s developmental changes? (“Things I can Do” checklist.)	_____	_____
5. Practice baby exercises and/or massage?	_____	_____
6. Practice peek-a-boo games & sitting baby to explore?	_____	_____
7. Review ways to keep baby safe during bath time? (Checking water temperature?)	_____	_____
8. Explain home activities?	_____	_____
9. Discuss parents’ support network?	_____	_____
10. Assign home activities for the week and set goals? (Self-Monitoring Checklist?)	_____	_____

Xerox*:

**Most handouts can be found in BOTH the Self Administered Manual and the “Incredible Babies” book.*

- Home Activities for the Week: Physical, Tactile and Visual Stimulation
- Points to Remember: Physical, Visual and Tactile Stimulation to Encourage Your Baby’s Brain Development
- Points to Remember: Reading with Your Baby
- Points to Remember: Baby Alert: Keeping Your Baby Safe During Baths
- Baby Alert
- Baby Journal: My Baby’s stimulation Journal (3-6 months)
- Things I Can Do (3-6 months)

Self-Evaluation:

“Gems” of Session—Reminder of things to pursue next session

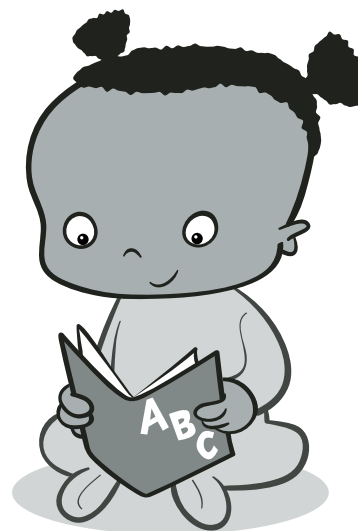
I hold and
cuddle my
baby



REFRIGERATOR NOTES

Reading with Your Baby

- Read at a quiet time when you are relaxed and comfortable—with TV and music turned off (this prevents over stimulation)
- Hold and cuddle your baby when reading
- Read for a few minutes each day when your baby is alert and has been fed
- If you have other children, read to them while you are holding or nursing your baby
- Point to pictures in the book and talk about them, or make up your own story
- Use “parent-ese” when reading—face to face, sing-songy, higher pitched, slower voice
- For 2–6 month old babies read books with rhymes and songs, or bold pictures, or black and white picture books. Use cloth books that your baby can touch and taste.
- For 6–9 month old babies read books that stimulate senses such as “touch and feel” books, board books, cloth books, teething books, books about daily routines such as bathing, eating, sleeping, and books that label objects and parts of the body.
- For 9–12 month old babies, read books that encourage children to chime in and repeat words (your baby won’t be able to talk yet, but will be interested in the patterns); books that label objects and parts of the body; books that illustrate action words such as walking, running; and books with flaps or noises. This is a good time to incorporate books into your child’s naptime and bedtime routines.
- Remember that children’s attention span for books will vary. Some children may pay attention for 10—15 minutes, while others may be bored after a few minutes. Don’t be discouraged if your child seems distracted at first. Read for a few minutes and then follow your child’s lead to another activity. Come back to reading again and again. Gradually your child’s attention span will increase. Several short reading times are just as beneficial as one longer time.



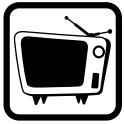
Home Visit Topic Four: Reading Babies' Minds and Regular Routines

There are a number of activities below that will give a 'taster' of this session. Use the relevant pages from the 'Coach Guidelines' and 'Self Study Guides for Parents' to help you to practice delivering this session as a coach. Remember we are not aiming to cover the whole session.

In role as coach:

1. Show Baby Program: Part 4, Vignette 5: Cuddling and Snuggling
2. Brainstorm ways to soothe babies

Handout for Parents: Home Activities, Refrigerator Notes, Typical Day handout, Baby and Parent Temperament handouts, Brainstorm/Buzz sheet (Do something special for yourself)



Vignette 5

Cuddling and Snuggling

- Father:** Uh, oh. Come on.
- Sister:** Maybe she went to the bathroom.
- Father:** That's too much, too much
- Father:** Are you alright? Shhh.



Questions to Facilitate Discussion

1. What is effective about this father's ability to read his baby's cues?
2. Do you find you can soothe your baby with cuddling or rocking when distressed?
3. How do you handle it when your baby is fussy and won't calm down with your approaches?
4. How does this baby self-soothe?
5. Have you noticed if your baby has any self-calming strategies?
6. What help can this parent give the older siblings to teach her how to interact with her baby sister?

Considerations

Full body contact with the baby upright next to parents' chest and gently rocking will help babies to soothe.

Babies in the first 3–6 months of life learn to regulate their emotions by being soothed, rocked and cuddled by their parents, and by having predictable responses from parents. Self-soothing such as thumb sucking, or physically turning away when overstimulated, or seeking out stimulation by reaching out to people, begins at 4–6 months of age.



Buzz

Pair up parents and ask them to share with each other some of the strategies they use to cope with a fussy baby who has been fed, changed and rocked but still won't calm down.

Ask them to write out 3–4 strategies for how they keep themselves calm.



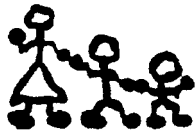
Practice With Babies-Sharing Emotions

Play with baby and see if parents can help their baby to be calm or playful or alert. Try sharing your baby's emotions with with your baby so parents and babies feel the same thing at the same time.

Coping with Crying

Once parents know their baby's needs have been met and they've tried to calm with cuddling and rocking and the baby is still crying and parents feel themselves getting frustrated, it's time for them to take care of themselves.

- Put on quiet music to distract yourself
- Put your baby in a safe place and let her cry for awhile
- Take deep breaths
- Remind yourself nothing is wrong with your baby—crying is her release and how she organizes herself and is normal
- Tell yourself “It will get better in a few months”
- Tell yourself, “I can cope with this”
- Visualize a place in your mind where you feel calm and free of stress
- Don't take your frustration out on your baby by shaking her
- Call someone for help



Your Baby's Temperament

Temperament is a behavioral style that refers to the natural way a person reacts or behaves in response to their environment. In the late 1950s, researchers Thomas, Chess, Birch, Hertzog and Korn identified nine traits or characteristics that are present at birth and are felt to influence development in important ways throughout life. While environment can modify these physical traits to some extent, the basic traits of a person are felt to be inborn and stable and do not result from the way a baby is parented.

Here are nine traits proposed by Thomas *et al.* that describe a baby or child's reactivity to his or her environment. Think about where your baby is on each of these traits. Each trait is a continuum so your baby may be very much like one of the traits, but he or she may also be in the middle:

My Baby's Temperament

My baby's activity level:

This is the amount s/he moves or wiggles or is on the go versus how much s/he relaxes or sits still or prefers quiet activities.

Very Active

Quiet and Relaxed

1 2 3 4 5

The regularity of my baby's bodily functions:

This is the predictability of his or her sleep times, appetite, and bowel movements.

Mostly Regular/Predictable

Mostly Irregular/Unpredictable

1 2 3 4 5

My baby's adaptability:

This is how s/he adapts to changes in routine, new food, new people, or new places.

Adapts Quickly

Slow to Adapt

1 2 3 4 5

My baby's approach:

This is how eager s/he is to try something new versus how fearful or shy s/he is when presented with a new situation or person.

Eager Initial Approach

Initial Withdrawal or Reluctance

1 2 3 4 5

My baby's physical sensitivity:

This is how sensitive s/he is to noise, tastes, textures, bright lights, touch or temperature.

Not Sensitive

Very sensitive

1 2 3 4 5

My baby's intensity:

This is how intensely he or she reacts emotionally to things, even minor events.

High Emotional Intensity

Mild Calm Reaction

1 2 3 4 5

My baby's distractibility:

This is the degree to which s/he is distracted by sounds, sights, or things in the environment versus how much s/he can shut out external stimuli and pay attention.

Very Distractible

1

2

3

4

Not Distractible

5

My baby's mood:

This is the degree to which s/he is happy or positive versus negative.

Positive Mood

1

2

3

4

Negative Mood

5

My baby's persistence:

This is the degree to which s/he can persist or sustain his or her attention versus how easily s/he gives up in the face of obstacles.

Long Attention Span

1

2

3

4

Short Attention Span

5

Easy and Flexible Temperament Baby

If your baby is mostly regular, adaptable, positive, calm and has a moderate activity level you have an easy temperament baby; about 40% of children fall into this category.

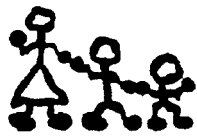
Slow to Warm Up and Cautious Baby

If your baby is slow to adapt, initially withdraws and has moderate activity and intensity, your baby will have a slow to warm up temperament; about 15% of children fall into this category.

Challenging Temperament Baby

If your baby has a high activity level, is unpredictable, poor adaptability, and is intense and negative you have a more challenging temperament baby; about 10% of children fall into this category.

About 35% of children are a combination of these patterns.



Parenting Approaches: A Temperament Focus

Since parents can't change their baby's temperamental style, parenting approaches must be accepting and responsive to the unique temperament or cues of each baby. It is important for parents to try to get a reasonable "fit" between their baby's temperament and their parenting style. This can be done by parents observing and learning about their baby's internal state and behavioral style and then altering or adapting their parenting expectations, encouragement, and responses to suit their baby's unique needs.

Remember, it is important not to label your baby or child as easy, shy, or difficult. These labels can damage your child's self-esteem and perhaps set up a self-fulfilling prophecy that prevents your child from expanding his or her behavioral repertoire. Perhaps, your baby's temperament may develop differently in subsequent years and this can be influenced by the environmental responses.

However, knowing what kind of temperament your baby has may make the difference between a happy or a troubled child and between an accepting or a frustrated parent. Understanding your baby's temperament can improve your relationship with your baby because you will learn how to bring out the best in your baby within the limits of his temperament. It is within your power as a parent to help your baby cope with his temperament, to build his self-esteem and eventually come to understand himself better.

For example, parenting the easy or flexible temperament baby will demand somewhat less parental time or attention because the baby will adapt easily to changes in routines, and may not express his or her individual wants. Because of this easy style, parents will need to make special efforts to find out about their baby's frustrations and hurts and interests and assess what he or she is thinking and feeling and why that is. Otherwise, such a child may become invisible in the family, insecure, and not be helped to develop his uniqueness.

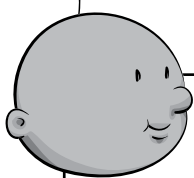
I recognize my babies' cues



On the other hand, the inflexible, hyperactive, inattentive, unpredictable, or easily frustrated baby may seem to have an insatiable need for attention. Babies with these challenging temperaments often leave their parents exhausted because of the amount of monitoring and attention that they require. These babies will need predictable routines, help in preparing for transitions, and outlets for their high level of energy. Parents can work to recognize cues and triggers for their baby's intense emotions and be proactive by prompting a self-calming activity, or changing to a soothing activity such as a story or warm bath. Parents of intense babies will strive to be tolerant, patient, and model appropriate responses. It is important to remove competing distractions when possible, make sure there is not too much stimulation causing them to dysregulate, provide frequent breaks, and try to respond calmly to the baby's intense reactions. Parents of intense babies will need to get support for themselves so they can rest and refuel their energy.



The cautious, slow to warm up baby will be relatively inactive, reluctant to explore, and may withdraw or react negatively to new situations. These babies will also need clear routines as well as encouragement to try new activities and ample warm up time to meet or be held by new people and eventually to enter new situations such as day care or preschool.



Refrigerator Notes

Goodness of Fit—Managing Your Baby's Temperament

Even if parents have different temperaments than their children, they can still strive for a good fit with their baby and child. A good fit is when parent's demands and expectations are compatible with their baby's temperament, abilities and characteristics. The goal is always to manage rather than to squelch or change temperament.

Here are some tips for achieving a good fit and managing your baby's temperament.

- Realize that your baby's temperament style is not your "fault" because temperament is something biological and innate, not something that is learned from parents. Your baby is probably not purposely trying to be difficult or irritating. Don't blame him or yourself.
- Respect your baby's temperament without comparing to other siblings or trying to change his or her basic temperament.
- Consider your own basic temperament and behavior and tailor your parenting responses when they clash with your baby's responses to encourage a better fit.
- Remember what you model for your children is what they learn from you.
- Try to consider and anticipate your baby's adaptability, activity level, sensitivity, biological rhythms and ability to sustain attention when planning activities that are most suitable for your baby.
- Try to focus on the issues of the moment. Do not project into the future.
- Review your expectations for your baby, your preferences and your values. Are they realistic and appropriate?
- Anticipate high risk situations and try to avoid or minimize them.
- Enjoy the interactions and the differences in each of your children.
- Avoid labeling your baby as bad or difficult as this may lead to negative self-image and further compound his difficulties.
- Try to distinguish between a tantrum that is temperamentally induced (reaction to disappointment) versus one that is manipulative (designed to get parent to give in).
- Help your baby feel special.
- Find a way to get relief for yourself and your baby by scheduling some time apart.

Remember above all temperament qualities can be shaped to work to a baby's advantage if they are sensibly managed.

**I make my
baby feel
special**



Home Visit Session Six: Babies' Emerging Sense of Self

There are a number of activities below that will give a 'taster' of this session. Use the relevant pages from the 'Coach Guidelines' and 'Self Study Guides for Parents' to help you to practice delivering this session as a coach. Remember we are not aiming to cover the whole session.

In role as coach:

1. Show Baby Program: Part 6, Vignette 1: "Avoiding Food Fights"
2. Practice Baby Directed Feeding

Handout for Parents: Home Activities, Refrigerator Notes, Ensuring Toddler's Safety Checklist, Things I Can Do Checklist



Vignette 1

Avoiding Food Fights

Mother: Hey Malcolm. Malcolm, here's your spoon. Here's your spoon. Are you ready to eat? Are you ready to eat? Are you ready to eat? Let's see, we have – how about a cheerio? Want a cheerio? Bless you. Bless you. You wanna cheerio? Yeah, eat a cheerio. You're eating a cheerio. Banging. How about some of this? Whoops. Oh, your bib. We forgot your bib. There you go, there. How about some hummus? Yeah. A little hummus huh? For me? Yeah, what do you think, huh? Where'd your spoon go? Where's your spoon? There's your spoon. There you go.



Questions to Facilitate Discussion

1. Why is it helpful to let him hold his own spoon?
2. How does this mother support his beginning need for independence?
3. How does this mother model her baby's behavior? (tapping)
4. What cues does her baby give her about eating?(in addition to verbal ones)
5. How long should she persist with feeding before giving up?

Considerations

Here the boy is more interested in exploring than eating, which is developmentally normal. Help parents understand that up until 12 months babies actually can receive all the nutrition they need from breast or formula milk. However, babies are offered solid food at 6 months in order to help them learn how to put food in their mouths, chew, swallow, and enjoy the process of eating with their family. Most babies are interested in feeding themselves by 7 months, although they likely don't eat much until 8 months.

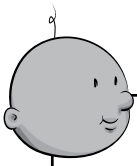
Baby feeding time is about so much more than food. It is a time for child-directed play, exploration, and communication. Help parents understand the value of babies being allowed to smear food, drop food, and explore for them to see their parents' excitement in their learning.

In the beginning, plates and spoons aren't needed. Help parents understand they can offer their baby soft foods the right size and shape so they can pick them up with their fingers and feed themselves. Encourage parents to offer what they are eating, such as soft vegetables and fruits with skins on them (without added sugar or salt). Encourage a variety of choices and let the baby set the pace. As soon as the baby indicates he/she wants down from the high chair, say, "all done" and let your baby down to play. The important point is to let your baby be in charge of his/her eating and to make the process fun.



Brainstorm/Buzz

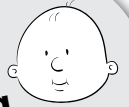
How might this mother be more baby-led in her approach?



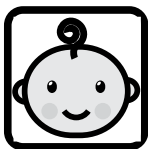
POINTS TO REMEMBER

Baby-led Feeding Solids

I am baby-directed in my feeding approach

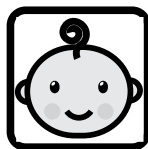


- Baby can sit in your lap or in a high chair with back support
- Allow your baby to explore the food (by touching, smearing, smelling)
- Remember at first your baby needs to learn about how to chew, use her tongue and swallow;
- Don't expect your baby to swallow new foods at first (or even second or third try); s/he may only take a few spoonfuls in the beginning
- Allow your baby some independence such as holding her spoon, or tippy cup, or feeding herself.
- Show your baby that you like the food. Make sounds like "Ummm" and "Ahh" when she eats; model appropriate eating behaviors yourself (let your baby feed you)
- Speak "parent-ese" to your baby during feeding and name the foods your baby is eating
- Show a joyful face and take turns feeding and talking
- Praise social behaviors and model them (say thank you for sharing)
- Respond to your baby's cues. Follow your babies lead and let her set the pace, choose foods to try and decide when she is done
- Combine nonverbal signals to help your baby communicate "all done" or "more"
- Don't get into food fights by forcing your baby to eat
- Make eating an enjoyable family time: have your baby take part in your own meals so s/he can copy your eating behaviors and always stay with your baby while s/he is eating
- Put an underlay of plastic under the chair of your baby – so it does not matter if your baby spills.



Baby Alert

Breast milk or first infant formula will still be your baby's primary source of nutrition for several more months, so don't worry if your baby does not eat very much. At this stage he is just learning how to chew, what foods feel like, how they taste, and how to swallow.



Baby Alert

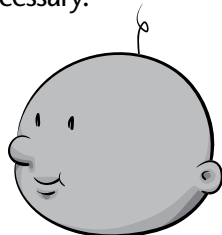
Avoid offering highly processed foods and foods with added salt or sugar, but check the most recent guidelines or with your health visitor or primary care provider for the latest research on what foods you should avoid in the first year of life.



POINTS TO REMEMBER

Baby-Led Introduction of Solid Foods (6 months)

- Right from the beginning at 6 months you can start by introducing a variety of savory foods representing a range of textures. Follow your baby's cues as to what she wants to eat and let her explore different tastes. Continuing to breast feed will increase your baby's immunity for a year.
- Your child is ready for solid food when he has head control, can sit upright, and when the tongue is no longer used to shove the food out of the way. Moreover, your child looks curiously at the food and opens her mouth when she sees the spoon.
- Let your baby eat in the high chair with your family whenever you can—not in front of the television or on the run. Be sure to do up the baby chair safety straps.
- Introduce solids at 6 month starting with a small amount of food once a day. Until then, breast milk or formula is all your baby needs. Waiting for solids until 6 months has been shown to reduce the risk of your baby getting allergies and, if you are breastfeeding, it will also increase your baby's immunity for the rest of the first year.
- Feed your baby in a high chair or let your baby sit in your lap – not in front of the television or while moving about. Be sure to do up the baby chair safety straps
- Check out the latest guidance on introducing solids from your health visitor, Ministry or World Health Organization web sites.
- Begin once a day feeding at a time where your baby is comfortable and not too hungry
- Do not worry if your baby does not seem interested in eating off the spoon. Let him smell and taste and touch the food, and eat with his fingers.
- Let your baby have his own spoon and model feeding yourself with a spoon.
- If your baby leans back or turns his head away from food he has probably had enough or is bored with the food game.
- Remember, babies first need to learn how to chew and swallow and your baby's nutrition is still mostly from milk. This will gradually change by 1 year, when your baby will now be getting most of their nutrition from solid foods. You can think of the offering of first solid foods as play time and practice for learning how to eat. By 7-9 months babies manage to eat very well and you will be offering 3 meals a day.
- Start with food that is finger-shaped so your baby can hold it and always try to stay with your child, when s/he eats, so you can take action if necessary.



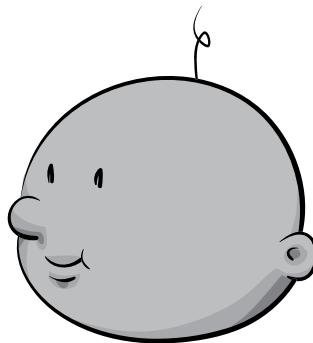


POINTS TO REMEMBER

Baby-led Introduction of Solid Foods (9-12 months)

- Continue to offer a variety of flavors and textures in food choices.
- Let your baby choose what foods he wants to try to eat. Allow for choice.
- Be prepared for messes by putting a plastic sheet or clean cloth under his high chair and dress him a short sleeve shirt. Remember food tastes, smells, and texture is all part of the learning process.
- Offer chunky, stick-shaped pieces of healthy food (vegetables, fruits, chicken) that your baby can hold on to. Soft, somewhat firm, lightly cooked vegetables are great for baby munching and tasting. Toast is easier to eat than soft bread and bread sticks are great for dipping.
- Stay with your baby whenever he is eating. Preferably, have your family meal at the same time to promote modeling eating behaviors.
- Most of all be baby-directed with feeding and let your child be in control of his own eating. Make this a time for fun, good exploration, and discovery. This will prevent many future problems over food.

Note: there is no need to puree or mash the food, even for spoon feeding. Continue to offer a variety of flavors and textures. Self-feeding allows babies to explore, taste, texture, and smell and encourages hand-eye coordination.

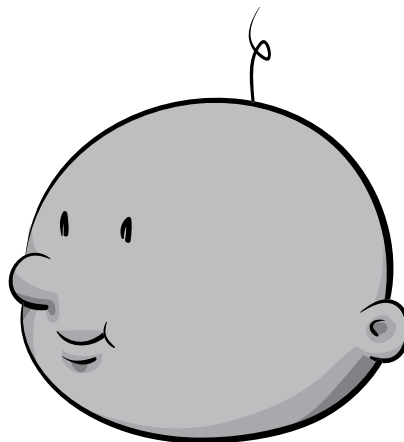




POINTS TO REMEMBER

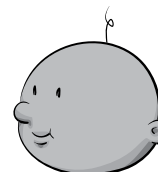
Paced, Baby-directed Bottle Feeding

- Feed your baby by following your baby's hunger cues. Hold your baby in your arms and invite your baby to use the bottle rather than forcing the nipple/teat into your baby's mouth.
- Make sure the milk is not too hot (37 degrees) by testing a bit of milk on your wrist.
- Make sure the teat/nipple hole isn't too small or too big. The teat/nipple hole is the right size when the milk runs several drops per minute. A small hole will frustrate your baby and make her swallow air. A large hole will result in your baby gulping milk too quickly.
- Hold the bottle at a low angle so that the teat/nipple is partly full, and your baby can control the amount of milk taken in. The teat/nipple does not need to be full of milk or the flow will be too quick.
- Allow your baby to control the milk intake during feeding. Have natural pauses or breaks when your baby is restless so there is no pressure to finish the bottle, and there are opportunities for burping.
- Stop when your baby lets go of the teat/nipple and doesn't want any more milk.
- Don't worry if your baby doesn't burp every time you pat her, she probably doesn't need to burp.
- Be present and aware of your baby's signals. Stay calm and minimize distractions during feeding. Be sure to turn the TV off.
- Keep your baby calm and up right for 20 minutes after feeding and avoid too much activity.
- Minimize the number of people feeding your baby to provide predictability to the feeding routine and enhance secure bonding.





Incredible Years® Babies Program Survey



First Name _____ Last Name _____

Baby Birthdate (mo./day/yr.) _____ Today's Date (mo./day/yr.) _____

Parents learn from their experiences interacting with their baby. Use this inventory to think about your strengths and what parenting strategies and activities work or don't work with your baby. Your answers will be kept confidential.

<i>When I Play with My Baby:</i>	Never	Rarely (monthly)	Sometimes (weekly)	Often (daily)	Consistently (multiple times a day)
1. I have fun playing games with my baby such as peekaboo	1	2	3	4	5
2. I sing to my baby	1	2	3	4	5
3. I read books to my baby	1	2	3	4	5
4. I give my baby massages	1	2	3	4	5
5. I find it hard to find time to play with my baby	1	2	3	4	5
6. I talk and speak "parent-ese" to my baby and describe my actions as well as my baby's actions	1	2	3	4	5
7. I do baby physical exercises (tummy time, pull ups, walking etc.)	1	2	3	4	5
8. I provide visual stimulation for my baby (e.g., toys, hanging objects)	1	2	3	4	5
9. I use hand puppets with my baby	1	2	3	4	5
10. I smile at and praise my baby	1	2	3	4	5
11. I mimic and imitate my baby's sounds	1	2	3	4	5
12. I find it hard to be affectionate with my baby	1	2	3	4	5
13. I use hand signals to communicate with my baby	1	2	3	4	5
14. I tell my baby I love him or her	1	2	3	4	5
15. I label my baby's positive emotions	1	2	3	4	5

When my Baby is Crying:	Not at all likely	Unlikely	Somewhat likely	Likely	Very Likely
1. I find it hard to soothe my baby when s/he is crying	1	2	3	4	5
2. I stay calm and use a calm down strategy when my baby is crying	1	2	3	4	5
3. I figure out the reason for my baby's crying (hunger, dirty diaper, amount of stimulation needed)	1	2	3	4	5
4. I ask for help when I feel overwhelmed and stressed	1	2	3	4	5
5. I modulate the amount of stimulation my baby needs when s/he is crying	1	2	3	4	5
6. I feel confident I can help my baby feel safe, loved and secure	1	2	3	4	5
7. I sing to my baby when s/he cries	1	2	3	4	5
8. I label my baby's negative emotions	1	2	3	4	5
9. I yell at my baby when s/he cries too long	1	2	3	4	5
10. I touch my baby in soothing and loving ways	1	2	3	4	5

My Baby's Development:

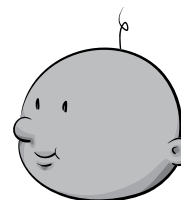
	Never	Rarely	Sometimes	Often	Always
1. I keep track of my baby's physical, motor and language developmental progress (e.g., journal)	1	2	3	4	5
2. I try to be flexible and baby-directed in terms of my baby's feeding schedule	1	2	3	4	5
3. I worry about my baby's sleep schedule and patterns	1	2	3	4	5
4. I plan activities I know will enhance my baby's language and physical development	1	2	3	4	5
5. I am comfortable calling the doctor or nurse when I am unsure whether my baby is sick or not developing normally	1	2	3	4	5
6. I assess my home to make it baby proof and safe (e.g., have car safety seat, water heater turned down, have smoke detectors)	1	2	3	4	5
7. I am worried about my baby's development	1	2	3	4	5
8. I feel my baby is bonded to me	1	2	3	4	5
9. I am baby-directed and put my baby in a central place in the household where s/he can see family action and I can talk to him or her	1	2	3	4	5
10. I make everyday things such as diapering, feeding, and bath time fun rituals.	1	2	3	4	5
11. I am baby directed in my feeding approach	1	2	3	4	5

Caring for Myself:

	Not at All	A Little	Somewhat	Often	Frequently
1. I get a sitter so I have time for myself	1	2	3	4	5
2. I know how to use calm down strategies when I am frustrated	1	2	3	4	5
3. I work at developing my family and friend support system	1	2	3	4	5
4. I pay attention to my needs for rest and self-care (taking naps, time with friends, exercise,)	1	2	3	4	5
5. I find it helpful to share parenting ideas with other parents	1	2	3	4	5
6. I find it helpful to share my parenting worries with others	1	2	3	4	5
7. I involve other family members in understanding my baby's interests and favorite games	1	2	3	4	5
<i>Please select the degree to which you agree or disagree with the following items.</i>	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
a. I am happy in my role as a parent.	1	2	3	4	5
b. Caring for my baby sometimes takes more time and energy than I have to give.	1	2	3	4	5
c. I feel overwhelmed by the responsibility of being a parent.	1	2	3	4	5
d. I feel close to my baby.	1	2	3	4	5
e. I feel confident as a parent.	1	2	3	4	5



Home Coach Parent Weekly Evaluation



Name _____ Session _____ Date _____

I found the content of this session was:

not helpful neutral helpful very helpful

I feel the video examples were:

not helpful neutral helpful very helpful

I feel the coach's teaching skill and our discussion was::

not helpful neutral helpful very helpful

The use of role play/practices was:

not helpful neutral helpful very helpful

I found the practices with our babies to be::

not helpful neutral helpful very helpful

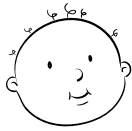
Additional comments:

(continue on back)

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Parents, teachers, and children training series



Parents and Babies Home Coaching Program Satisfaction Questionnaire

Name _____ Date _____

The following questionnaire is part of our evaluation of the Incredible Years Parents and Babies Program that you have received. It is important that you answer as honestly as possible. All responses will be strictly confidential. Your cooperation is greatly appreciated!

Please select the response that best expressly how you feel at this point.

A. Incredible Years Teaching Format / Methods

1. Content of the information presented during my home coach visit was

Useless *Slightly useless* *Neutral* *Somewhat useful* *Useful*

2. Demonstration of parent-baby interactions through the use of video vignettes was

Useless *Slightly useless* *Neutral* *Somewhat useful* *Useful*

3. The home practice activities (e.g., imitating, singing, reading to my baby) were

Useless *Slightly useless* *Neutral* *Somewhat useful* *Useful*

4. The baby book was

Useless *Slightly useless* *Neutral* *Somewhat useful* *Useful* *Did not receive a book*

B. Specific Parenting Techniques/Topics

1. Information learned about baby's development milestones and completing "things I can do" handout was

Useless *Slightly useless* *Neutral* *Somewhat useful* *Useful* *Topic not covered*

2. Providing physical, tactile, and visual stimulation (e.g., baby massage, games, exercises) was

Useless *Slightly useless* *Neutral* *Somewhat useful* *Useful* *Topic not covered*

3. Information I learned about feeding my baby in a baby-led way was

Useless *Slightly useless* *Neutral* *Somewhat useful* *Useful* *Topic not covered*

4. Learning about promoting my baby language and brain development (e.g., speaking “parent-ese”) was

- Useless Slightly useless Neutral Somewhat useful Useful Topic not covered

5. Helping my baby feel loved, safe, and secure was

- Useless Slightly useless Neutral Somewhat useful Useful Topic not covered

6. Flexibility in routines and transition to predictable daily schedules was

- Useless Slightly useless Neutral Somewhat useful Useful Topic not covered

7. Knowing how to be flexible in routines and how to transition to a more predictable daily schedule after 6 months was

- Useless Slightly useless Neutral Somewhat useful Useful Topic not covered

C. Evaluation of Incredible Years Coach

1. I feel that the coach’s teaching of Incredible Years Baby Program was

- Poor Below average Average Above average Excellent

2. I feel that my relationship with my coach was

- Poor Below average Average Above average Excellent

D. The Overall Program

1. The bonding that I feel with my baby since I participated in this program is

- Worse Slightly worse The same Slightly improved Greatly improved

2. Would you recommend this Incredible Years Parents and Babies Program to a friend or relative with a baby?

- Yes No

3. Did you feel that the IY Parents and Baby program was enough time. Please indicate how many home coaching sessions you received.

- Yes No Number of sessions _____

4. How could we improve the program?



Incredible Years®

HOME VISITING COACH COLLABORATIVE PROCESS CHECKLIST

07/2013

This checklist is designed for a home visitor coach to complete following a home visit session, or to complete when reviewing a video of a home session. By watching the video of a session, and looking for the following points, a home visitor coach can self-reflect on his or her therapeutic process and methods and identify specific goals for future progress. This checklist is designed to complement the more qualitative self-evaluation form and the 4 specific home checklists for each main topic area, which list the key content and vignettes that have been covered. This form will also be used by IY mentors for video certification/accreditation review.

Home Coach Self-Evaluation (name): _____

Certified Mentor/Trainer Evaluation (name): _____

Date: _____

SET UP	YES	NO	N/A
---------------	------------	-----------	------------

Did the Home Coach:

- | | | | |
|---|-------|-------|-------|
| 1. Encourage viewing in a safe home setting where everyone can see the TV/monitor? | _____ | _____ | _____ |
| 2. Help all family members feel involved, supported and cared for? (If children are present, help them be involved with a play activity.) | _____ | _____ | _____ |
| 3. Address parents' goals? | _____ | _____ | _____ |
| 4. Explain and review agenda for home coaching session? | _____ | _____ | _____ |
| 5. Find out parent's time constraints? | _____ | _____ | _____ |
| 6. Make an agreement regarding number of home sessions and who will be present (e.g., children, parents). | _____ | _____ | _____ |

REVIEW PARENT'S HOME ACTIVITIES	YES	NO	N/A
--	------------	-----------	------------

Did the Home Coach:

- | | | | |
|---|-------|-------|-------|
| 1. If children are present, supports parents in setting up activities to engage children while home activities are discussed? | _____ | _____ | _____ |
| 2. Begin the discussion by asking how home activities went during this past week? (e.g., Ask about home play and coaching times, chapters read, behaviors ignored, weekly goals met etc.) | _____ | _____ | _____ |
| 3. Give parent(s) the chance to talk about their week and reflect on their experiences with home activities assigned? | _____ | _____ | _____ |

Leader Collaborative Process Checklist, Continued

REVIEW PARENT'S HOME ACTIVITIES, Cont'd.	YES	NO	N/A
1. Praise, support, and reward whatever efforts parents made in working on their personal goals this week? (e.g. bring special prize for goals accomplished)	_____	_____	_____
2. Highlight, write down, and praise key principles that parent's examples illustrate? (e.g., <i>"That's great! You remembered that making the task fun was more likely to motivate him. I think that our next principle will be "Fun Principle"—kids are most likely to learn when it's fun."</i>)	_____	_____	_____
3. If children are present, involved children in review of home activities?	_____	_____	_____
4. Help parent(s) integrate prior learning by asking them to use "principles" from prior sessions to solve new child problems that occur?	_____	_____	_____
5. Explore with parent(s) who didn't complete the home activities what made it difficult, what the barriers were, and learn how to adapt activities or overcome barriers to fit their needs and goals?	_____	_____	_____
6. If a parent's description of how s/he applied the skills makes it clear that he/she misunderstood, does the coach accept responsibility for the misunderstanding rather than leave the parent feeling responsible for the failure? (e.g., <i>"I'm really glad you shared that, because I see I completely forgot to tell you a really important point last week. You couldn't possibly have known, but when you do that, it's important to..."</i> vs. e.g., <i>"You misunderstood the assignment. Remember, when you do that, it's important to..."</i>)	_____	_____	_____
7. Praise and encourage parent(s) for what they did well and recognize their beginning steps at change, rather than correct their process?	_____	_____	_____
8. Look for opportunities to practice or rehearse new ideas when reviewing home activities and experiences?	_____	_____	_____
9. Limit the home activities discussion (approximately 15 minutes) to give adequate time for new learning?	_____	_____	_____
WHEN BEGINNING NEW TOPIC/SHOWING THE VIGNETTES	YES	NO	N/A
Did the Home Coach:			
1. Begin the discussion of new topic by brainstorming benefits to	_____	_____	_____

Leader Collaborative Process Checklist, Continued

1. help parent understand how the topic addresses their goals?
(Benefits and barriers exercises)
2. Focus parent(s) on what they are about to see on the vignettes and what to look for *before* showing the vignette? _____
3. Begin discussion and problem solving of vignette by asking questions to parent(s) about what s/he thought was happening in the vignette? _____
4. Acknowledge responses parent has to a vignette?
(For example, if a parent laughs during a vignette, as soon as the tape stops the coach may say, "*Sue, you laughed at that one.*" Then pause and let the parent share her impressions.) _____
5. Paraphrase and highlight the parent's insights– encouraging parent to write key points and principles in their home journal or yellow parent manual? _____
6. Move on to the next vignette after key points have been discussed, rather than let discussion go on at length? (This ensures that the coach will have sufficient time for role-play/practice.) _____
7. Allow for discussion and questions following each vignette? _____
8. Focus parent on the relevance of the interaction on the video or the principle learned for their own lives and their children (if parent becomes distracted by some aspect of the vignette, such as clothing or responses that seem phony)? _____
9. Help parents understand how the concepts/skills they are learning are related to their own goals for themselves and their children? _____
10. Ask questions that help parents reflect on their feelings, thoughts, and behaviors? _____
11. Use video vignettes to trigger parent practices with coach or with their own children? _____
12. Pause longer vignettes several times to mediate what is happening and to ask parent(s) what they would do differently or to predict what they would do next? _____
13. Pause introductory narrations to ask parent(s) if they have questions and to underscore key points being made? Then introduce the vignette and what to watch for? _____

Leader Collaborative Process Checklist, Continued

- 1. Select vignettes according to parent’s goals, ethnicity, number of children in family, or age, development and temperament of children? Or, if parent is also in a group, consult with group leader to choose most helpful vignettes? _____
- 2. Limit number of vignettes according to parent’s attention span and interest? (On average 4-6 vignettes are shown depending on length of vignette or length of time for home visit.) _____

PRACTICE AND ROLE PLAYS

YES NO N/A

Did the Home Coach:

- 1. Ensure that the skill to be practiced has been covered in the vignettes and discussion prior to asking parent to role-play it? (This ensures the likelihood of success.) _____
- 2. Do several spontaneous role plays that are derived from parents’ descriptions of what happened at home? (“Show me what that looks like.”) _____
- 3. Do at least one planned practice over the course of one home session? _____
- 4. When possible ask parents to do practices with children? (If children are not present, do with coach in “child” role.) _____
- 5. Use all of the following skills when coaching role play/practices?
 - a. Tell parents and children what the purpose of the practice is? _____
 - b. Praise parent’s efforts to use skills being learned in the home session? _____
 - c. Provide enough “scaffolding” so that parents are successful in their role as “parent?” (e.g., pause practice when necessary to explore new ideas) _____
 - d. Provide parent with a description of his/her role and script? (e.g., persistence or academic coaching or ignoring or problem solving) _____
 - e. Freeze role play/practice periodically to redirect, give clarification, or reinforce parent and children? _____
 - f. Take responsibility for having given poor instructions if role-play/practice is not successful and allow parent to rewind and replay? _____
 - g. Debrief with each parent(s) afterwards? (How did that feel?) _____

Leader Collaborative Process Checklist, Continued

- 1. h. Solicit feedback from children (if old enough) regarding their feelings about playing with their parent? _____
- i. Praise and/or reward children for their participation & for positive behaviors observed? (use stickers, hand stamps, small prizes) _____
- j. Re-run practice, changing roles or involving different parent? _____
- k. Use and value play resources available in home. _____
- l. When appropriate, loan parents additional play resources if not available (e.g., crayons, playdough, books). _____

REVIEW REFRIGERATOR NOTES, HOME ACTIVITIES AND WRAP-UP

YES NO N/A

Did the Home Coach:

- 1. Begin the ending process with about 10-15 minutes remaining? _____
- 2. Summarize this home session’s learning? (One way to do this is to review refrigerator notes together.) _____
- 3. Summarize parent’s strengths and review parents’ relationship with child? _____
- 4. Review with parent(s) the home activity sheet, including why that is important, and how they will try to do it or overcome any barriers? _____
- 5. Talk about any adaptations to the home activity for particular families? _____
- 6. Show support and acceptance if parents can’t commit to all the home activities? (Support realistic plans.) _____
- 7. Have parents complete the Self-Monitoring Checklist and/or commit to goals for the upcoming week? _____
- 8. Have parents complete the session evaluation form? (Ask what aspects of the session are most helpful to them.) _____
- 9. Set up next meeting time? _____

Leader Collaborative Process Checklist, Continued

REMEMBER: Your goal in the home coaching sessions should be to draw from the parent(s) the key ideas, insights and management principles so they can self-reflect. When possible, parent(s) should be the one who generates the principles, describe the significance for achieving their goals, highlight what was effective or ineffective on the video vignettes, and practice how to implement the skills. People are far more likely to use new behaviors when they have seen them being used successfully (video and live modeling) and when they have practiced them with support and feedback from a coach than when they simply hear about them in a didactic way.



**Incredible Years® Parent Home Visiting Coach
Self/Peer Evaluation Form**

(07/2013)

This evaluation is designed to be used in conjunction with the Home Coach Collaborative Process Checklist because it allows for more qualitative comments about coaching styles and future goals than a simple “yes/no” format.

Home Coach Self-Evaluation (name): _____

Certified Mentor/Trainer Evaluation (name): _____

Date: _____

Please comment on the parent home coaching sessions based on the following criteria:

I. HOME COACHING PROCESS SKILLS	COMMENTS
Builds rapport with parent(s) and children	
Encourages everyone to participate & establishes parents’ long term goals	
Models open-ended questions to facilitate discussion	
Reinforces parents’ ideas and fosters parents’ self-reflection	
Encourages parents to problem-solve when possible	
Fosters idea that parents will learn from their experiences trying out different parenting approaches	
Helps parents learn how to support other family members and receive support	
Views every family member as equally important and valued	
Identifies each family member’s strengths	
Creates a feeling of safety when discussing parenting issues	
Creates an atmosphere where parents feel they are decision-makers and sharing thoughts and feelings is appropriate	

II. LEADER LEADERSHIP SKILLS	COMMENTS
Prepares materials in advance of session and is "prepared" for home session	
Explains agenda for home session	
Sensitive to time management and parents' ability to stay focused (60-90 min)	
Reviews short term goals for home coaching meeting and how they connect to parents' long term goals	
Emphasizes the importance of home activities and practice	
Reviews home activities from previous session & reinforces successful steps	
Summarizes and restates important points	
Imposes sufficient structure to cover topic adequately	
Prevents sidetracking by family members	
Knows when to be flexible and allow a digression for an important issue and knows how to tie it into session's content	
Anticipates potential difficulties/barriers	
Predicts behaviors and feelings	
Encourages generalization of parenting concepts to different settings and situations	
Encourages parents to work for long-term goals as opposed to "quick fix"	

II. LEADER LEADERSHIP SKILLS <i>cont'd</i>	COMMENTS
Helps parents focus on positive and realistic changes	
Balances discussion on affective and cognitive domains	
Sets up practice with children	
Coaches & supports practice play activities	
Reviews handouts and home activities for next home session	
Helps parents set goals for the week	
Encourage parent evaluations of home session (see form) and discussion of usefulness	

III. LEADER RELATIONSHIP BUILDING SKILLS	COMMENTS
Uses humor and fosters optimism	
Normalizes problems when appropriate	
Validates and supports parents' feelings (reflective statements)	
Shares personal experiences when appropriate	

III. LEADER RELATIONSHIP BUILDING SKILLS cont'd	COMMENTS
Fosters a partnership or collaborative model (as opposed to an "expert" model)	
Fosters a coping model as opposed to a mastery model of learning	
Reframes experiences from the child's viewpoint and modifies parents' negative attributions	
Strategically confronts, challenges and teaches parents when necessary	
Identifies and discusses barriers to change	
Maintains control of session but is parent-centered	
Advocates for parents	
Praises parents' insights and skills	
Rewards goals that are achieved	

IV. LEADER KNOWLEDGE	COMMENTS
Demonstrates knowledge of content covered at session	
Explains rationale for principles covered in clear, convincing manner	
Integrates parents' ideas and problems with important content and child development principles	
Uses appropriate analogies and metaphors to explain theories or concepts	

V. LEADER METHODS	COMMENTS
Uses video vignette examples efficiently and strategically to address parent goals and targeted new learning	
Uses role play practices and rehearsal with children to reinforce learning	
Reviews practice experience and gives encouraging feedback	
Uses modeling by self when appropriate (with parents' children)	
Mediates vignettes with pauses and time for parent reflection and discussion	
Chooses vignettes according to parents' needs and goals	

VI. PARENTS' RESPONSES	COMMENTS
Parents appear involved in session (write down key points)	
Parents complete home activities, ask questions and are active participants	
Parents write down goals for the upcoming week	
Parents complete positive evaluations of sessions	

Summary Comments: _____

Getting the Most out of your Skype Consultation with IY Mentors/Trainers/Peer Coaches

Written by: Carolyn Webster-Stratton

While face-to-face IY group consultation is the best group leader learning because of the opportunities for modeling practices and supportive input from other group leaders, it is not always possible. Barriers to this approach may include the cost of a trainer/mentor/peer coach to travel to the location as well as the group leaders' time and travel. Moreover, there can be difficulty in finding a date that suits all group leaders for a face-to-face meeting without interfering with other agency obligations. Skype consultations offer opportunities for more consultation scheduled at group leader convenience and in small groups, even with dyads. However, it should not replace face-to-face consultation but supplement it.

This document provides some tips for getting the most out of your Skype consultation calls with accredited IY mentors, trainers and peer coaches.

1

STEP ONE: DEFINE THE SCOPE AND STRUCTURE

- Skype consultation calls are typically 1-hour in length and can include multiple group leaders and agency managers.
- Consultation calls can include a discussion of video segments sent to the IY mentor/trainer/peer coach for review. Or, consultations may be a discussion of questions and issues related to program delivery.
- For discussion of videos, plan on reviewing no more than 2 video pair group leaders in a 1-hour Skype call. Keep video clips to 10-20 minutes for mentor review.

2

STEP TWO: GROUP LEADER PREPARATION FOR THE SKYPE CALL

- If no video is to be sent, review your goals and questions in advance of call and email agenda to IY mentor or trainer 1-2 days prior to Skype call.
- For discussion of video segments, first review with co-leader (using the group collaborative checklist) and pick 10-20 minute segments from the group video for mentor/trainer/peer coach review. Record time code on area to be reviewed.
- Complete Skype call prep form that is attached. This outlines brief background of video clip (session topic and context for what has been covered previously in session) as well as your goals for the video clip and any other issues you want to discuss.
- Send video clip to mentor/trainer/peer coach 7-10 days in advance of the Skype call. Work with your agency to set up a release of the video clip that is encrypted or password protected so that only the mentor or trainer can open it.

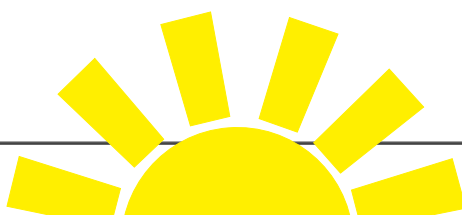
- Include with video clip, session checklist, participant evaluations, and Skype call prep sheet.
- Confirm time for Skype call.

3 STEP THREE: COMBINE SKYPE CALLS WITH FACE-TO-FACE CONSULTATIONS

- We recommend after a 3-day training workshop to have a face-to-face consultation early on when first delivering the program. Ideally after the first or 2nd group session. This will help group leader to know the mentor/trainer/peer coach and start developing a personal relationship before the Skype call occurs. If this is not feasible, then scheduling a call in advance of the group starting is very useful.
- Set up Skype calls ideally 3 of these spread throughout the group sessions. For example, every 2-3 weeks. An 18-session group would get one call at session, 4 and 8 and 12.
- If feasible a 2nd face-to-face consultation would happen about 2/3 way through the program. Strive for at least one face-to-face consultation when group leaders are delivering their first groups.
- After the group has been completed it is helpful to have a follow-up Skype call to summarize key learning and evaluations and plan for future goals. Additionally, a Skype call can be set up to help group leaders prepare their first set of materials for accreditation.



NOTE: Plan your goals ahead of time for each call and summarize your goals for the next call.





Preparing for your Video Skype Consultation

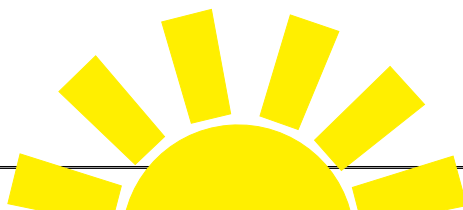
Return this form to: meganp@incredibleyears.com

Name of Group Leaders:	Date:
_____	_____
_____	Video clip time codes:
Session Topic: _____	_____

Brief description of background of video clip:

Goals for video clip sent:

Any other specific issues I would like to discuss:





Application for Certification as an Incredible Years® Baby Parent Home Coach

Name: _____

Home Address: _____

Zip/Postal Code: _____

Home Phone: _____ Work Phone: _____

E-mail: _____

Occupation: _____

Month/Year of Baby Training: _____

Trainer: _____

APPLICATION BILLING INFORMATION (NAME & ADDRESS):

Organization/Name: _____

Address: _____

City/State/Province: _____ Postal Code: _____

Country: _____

E-mail for receipt: _____

This form must accompany your submission of video for review.

Please attach a 1-page letter describing:

- Courses taken in child development
- Your experience with parents, babies, and children
- Your goals, plans, and philosophy of parenting

Please provide two professional letters of reference attesting to your clinical skills in working with individuals and groups.

Please see website and leader’s manual for certification application requirements. Contact Incredible Years office with any questions (incredibleyears@incredibleyears.com)

Send materials to:

Incredible Years Certification Committee
1411 8th Avenue West
Seattle, WA 98119 USA

Benefits of Using the Incredible Years® Home Coaching Parent Programs: Assuring Success

Carolyn Webster-Stratton, MSN, MPH, Ph.D.



Introduction

There is widespread evidence that evidence-based parent interventions treat a range of child mental health and behavioral problems (Kazdin & Weisz, 2010). Moreover, group-based parent interventions frequently rank high on lists of evidence-based practices (Furlong et al., 2012) with studies demonstrating that well-designed group-based models are often at least as effective as the best alternative one-on-one approaches.

There are several possible reasons for the greater effectiveness and acceptability of group-based interventions. Groups allow parents to learn from each other's experiences and to realize they are not alone in their parenting frustrations and difficulties. In addition to benefitting from hearing about parents who are struggling with similar child behaviors, parents will also be exposed to discussions and problem solving about behavioral issues that their child is not yet experiencing. This prepares parents for coping with new problems that may arise in the future. In these groups, parents often form strong supportive networks that are continued after the parenting program has ended.

For many parents, receiving feedback and ideas from other parents is more motivating and acceptable than similar feedback given by a therapist. The

supportive group dynamics often increases parents' motivation to try new approaches. Some studies have shown that some parents find group-based approaches more acceptable and less stigmatizing than one-on-one office-based therapy (50% vs. 32% (Cunningham, Bremner, & Boyle, 1995). These authors reported that parents for whom English was a second language had an even greater aversion to attending office-based therapy (19% willing vs. 63% who agreed to attend a group program).

Although group-based services have a number of advantages, including cost-effectiveness and acceptability to parents, there are unique barriers that can inhibit their wider dissemination. Agencies may have too few clients to fill a group, parents may have to wait too long before the next group starts, or there is no financial mechanism or incentive for billing group work. This can be especially true for small communities or private practitioners. Moreover, some parents are not able or motivated to access parenting groups either because of work schedule conflicts, travel distance barriers, illness, lack of babysitting support, or anxiety and fear about group disclosure and lack of family privacy. Factors predicting poor treatment outcome or drop out from any evidence-based programs (group or individual) include child factors (e.g., ADHD, high levels of externalizing problems); parent factors (e.g., mental health, substance abuse, marital discord; and family demographics (e.g., single parent, poverty, poor education) (Bagner & Graziano, 2012). This suggests that the format and delivery of evidence-based interventions may strongly influence the number of people who could be served by an intervention. This also suggests that providing different options for service delivery is necessary, especially providing extra support for more vulnerable families. This is important because the societal impact of an intervention is determined not only by its effectiveness but also by its reach, ease of adoption, implementation, and ability to sustain long term outcomes.

This article describes a home coaching model for delivering the Incredible Years Baby, Toddler, Preschool and School Age Parenting programs. Multiple randomized control group studies utilizing the Incredible Years group-based model over the past 3 decades have shown that parents make significant changes in their parenting and their children, in turn, show reductions in behavior problems and increases in their social, emotional and school readiness outcomes (Menting, Orobio de Castro, & Matthys, 2013; Webster-Stratton, 2016). It is believed that adapting this evidence-based program to a home-based format utilizing many of the same group-based principles will overcome some of the logistical and psychological barriers to accessing services.

Incredible Years Home Coaching Programs

The Incredible Years Home Coaching program is designed to support children and families in several ways. It can be offered as an additional support to parents attending Incredible Years parenting groups, because it can be used to make-up sessions with parents who miss a group session, or need supplemental coaching

with their children. Additionally IY home coaching can be used for parents and caregivers who are unable to attend an Incredible Years parenting group due to depression, schedule conflicts, or in cases where a parent group is not scheduled to start immediately. The Home Coaching program is a good way to offer immediate individual services to a family in situations where it is not acceptable to delay treatment (for example, child welfare involved family) or if parents have a family circumstance or mental illness that prevents them from attending group treatment. Ideally, some families who receive the Home Coaching sessions will eventually transition to an IY group so that they receive the benefit of the group support. Home coaching of the IY Baby, Toddler, Preschool or School Age programs are delivered by “coaches” who have received authorized group-based basic training in IY concepts and principles plus additional home IY coach training. During the home visits, coaches help parents identify their goals and barriers. As in the group model, vignettes are selected to show to parents based on their child’s developmental level, family circumstances, and presenting child-problems. . Coaches set up targeted parenting practice strategies between parents and their children and provide modeling, feedback, praise, prompts and support. If parents are receiving home coaching as a supplement to the parent group, then the home coaches coordinate the home coaching sessions to fit with what the parent is learning, and struggling with, in the group setting.

The Incredible Years Home Coaching program has been implemented in a number of countries including the United States, England, Ireland, New Zealand and Wales. A new study evaluating the IY group approach alone compared with the IY group approach PLUS home parent support for higher risk families has suggested few differences immediate post treatment but at 1-year follow-up home coaching produced more sustained outcomes on all measures (Lees & Fergusson, 2015)(Diane Lees 2016 personal communication). Attendance and retention was also greater in the intervention which included home parent support with the group-based IY parent program. Satisfaction was high in both groups.

Group IY Parent Program Plus Supplemental Home Coaching

Parents who may benefit from home coaching in addition to the group program include the following:

- parents referred or mandated to take the parenting program because of child neglect or abuse
- parents who have missed some group sessions due to illness or conflicting work schedules
- parents who are having difficulty understanding and using the recommended parenting approaches and/or fail to do the home activities
- parents with developmental delays or mental illness

If home coaching is used in addition to group sessions, it is recommended that a minimum of 4 visits are made. Visits are spaced at 3-4 week intervals following

completion of core units of the IY group program. In this way, the home coaching therapist can help summarize and solidify the parents' learning from the prior unit.

Home-based Coaching Model

For families who cannot attend groups, the entire IY program can be delivered as a home-based model. Home coaches meet with parents weekly in 60-90 minute sessions to define goals, show vignettes, and set up coached practice sessions. They explain home activity assignments and check in with parents about their progress each week. Depending on which of the four parent programs is being offered, it will take a minimum of 6 to 10 home visits to cover all the topic areas and many parents will require more sessions to complete the protocols. Home coaches are encouraged to tailor topics and sessions according to parents' level of understanding, success with practice activities and weekly assignments. A case study description of how the parent program was delivered at home over a 6 months period is described in a chapter in a book by J. Gordon (Gordon, 2015).

One randomized control group study evaluated the effects of an 11 week, 90 minute IY coach home visit intervention with American Indian communities (Dionne, Davis, Sheeber, & Madrigal, 2009). Coaches used the collaborative approach as recommended in standard group program delivery (Webster-Stratton, 2012). However, they also drew connections between the skills to be taught and traditional Indian values, traditions and beliefs. With every skill, culturally based stories were offered to create stronger connections with the skill. Fifty-five percent of the intervention families completed all the sessions and an average of 8 home sessions were completed. Results indicated significant improvement across time for intervention children and parents compared with the delayed-intervention group. Responses indicated 90% of parents saw benefits for themselves, their child, and their family, 89% reported feeling more confident in their ability to discipline their child and 93% reported improvements in their child's behavior.

Therapists delivering the home coaching program have learned key lessons and shared strategies that enhance the home coach's relationship with parents and caregivers and set up the intervention to effectively meet the family's goals. Below key areas of focus for home coaches are described, as well as strategies and skills for maximizing results for those participating in the Incredible Years home coaching program.

Preparing for Home Coaching Sessions

Before doing a home visit, the IY home coach prepares for this visit by reviewing parents' goals (see below) and selecting video vignettes to be shown and questions to be asked. The group leader basic group manual can be used by coaches to review the kinds of questions and considerations for each vignette selected. Next the IY home coach plans for the kind of practice activities that will be set up depending on whether the children will be home or not. The specific IY coach visit protocol for each topic can be reviewed in the IY home coaching guidelines manual. If the parent is also participating in the IY parent group, the coach will check with the

group leader to find out what parents' goals are and what successes or difficulties the parent has had with doing weekly home activities or practicing skills in the group sessions. The IY coach will also review what vignettes the parent has already viewed in the group and choose additional vignettes to show parents.

The IY coach prepares materials needed for this visit such as a working computer, appropriate DVD vignettes to be shown, goal statements, refrigerator handouts, home assignments and extra toys, puppets or stickers needed for practice or for keeping child engaged and reinforced for playing quietly while talking to parents.

Establishing a Collaborative Partnership

Developing a positive connection with the family will occur throughout every home visit. Coaches begin by introducing themselves and asking questions to find out about the family. They listen empathically to parents' experiences and concerns. Home coaches will be accepting, non-judgmental, and collaborative with parents. They will reinforce parents for their positive suggestions and behaviors and their attempts to try new parenting approaches. If the IY coach is also working with the parents in the parent group, then he/she may already have a relationship with the parents and know that family background. If so, less time can be spent on this initial stage, and the discussion can move quickly to the parents' goals. If the IY coach is meeting the family for the first time, then this rapport building and information getting is very important and may comprise most of the first visit.

Learning about Parents' Concerns, Culture and Goals

Coaches begin the collaborative process by asking in a respectful way open ended questions to allow the parent(s) to tell their story about their family and child. A typical first question might be, "*Tell me more about what life is like with your child.*" Coaches ask the parents to talk about their child and follow-up with further questions to clarify. Coaches show genuine interest in what parents are telling them. They actively listen to what parents are saying. They explore any previous experiences with in-home services and ask what they think is important for them to know about their family.

The following are some questions the IY home coach can ask or keep in mind when establishing this collaborative partnership.

Coach:

What is important for me to know about being in your home?

What would you like me to know about you and your family?

What expectations do you have of me while I am in your home?

What would be the best way for us to work together during our sessions and make the most out of our time together?

What kind of environment is best for you to work/ learn in?

Would it be helpful to meet without the children here sometimes?

How should we handle phone calls or other family members during our time together?

What is the best time for us to meet when you feel safe to talk?

Child Problems

If a parent begins to talk about a problem they are concerned about, the coach asks the parent to elaborate further. In doing so, the parent is encouraged to tell about specific times the problem occurred. If a parent says, "He is always fighting with his sister or father or me" the IY coach might reply, "Tell me more about a recent time that happened."

Getting parents to focus on specific incidents gives the message that coaches are trying to solve the problem, not listen or gossip about their child. As parents tell coaches more about the incident, coaches continue to ask focused questions which get the parent to talk about the antecedents and consequences of the behavior (e.g., "What was happening when the child did that? "So how did you respond when he did that?")

It will be important to consider scheduling this first visit with the parent when the child is not at home or someone else can occupy the child. Parents may have a lot of concerns about their child and it will be important for them to be able to talk about these things without the child overhearing.

Child Strengths

As important as it is to learn about the problems a parent is facing with a child, it is also important to learn about the child's strengths. By asking about the child's strengths, home visitor coaches are emphasizing that it is important to look for the positive behaviors and aspects of the child's personality. Encourage parents to talk about what their child does well and what the child is interested in.

Developing Goals

Once coaches have a good understanding of the child and how the parents interact with him or her and the family situation, it is helpful to ask parents what specific goals they have for themselves and for their child. Helping parents and caregivers formulate their goals allows the IY coach to tailor the Incredible Years home coaching program to effectively meet the needs of families. Parents who are already participating in the IY group will have discussed these goals in the first group session. In this case, the IY coach will have a copy of these goals from the IY group leader and will review these with the parents and make sure these are still the goals parents want to work on. Parents who aren't attending the group should be given the *Parents Thinking Like Scientists* goals sheets and asked to complete it. For each goal, the IY coach helps the parents describe what they would like to happen in concrete, observable ways. For example,

Coach: *What are your child's problems that you would like help with?*

What would you like him to learn?

Parent: *He tantrums in the grocery store when he doesn't get what he wants and needs to be less disrespectful.*

Coach: *How will you know that he is respecting you more? What behaviors does he need to use to show you he is respectful?*

Parent: *He will mind me when I tell him to do something and stop tantruming!*

Coach: *What percentage of the time do you expect him to follow your directions when you ask him to do something?*

See Table 1

Some parents have difficulty framing their goals as positive child behaviors rather than as negative behaviors. They may tell stories of all their child's misbehaviors but be unable to describe the "positive opposite" behaviors they want to encourage. For example, prompting a child to talk quietly with an inside voice versus yelling at her to stop yelling. Or, helping to teach the child to wait patiently versus imposing harsh discipline for grabbing. Sometimes during these discussions the group leader discovers that the parent has unrealistic goals for the child's developmental ability and age. For example, most toddlers will grab to get what they want, or throw tantrums when prohibited from having something they want. Parents may not understand that toddlers have not yet developed the self-regulation skills or language to ask for what they want or be able to control their impulsivity and wait. The group leader may discover that some parents expect preschoolers to be 100% compliant and polite in response to their directions and not understand that it is normal and healthy for preschoolers to resist directions 1/3 of the time. This discussion with the parents' regarding their goals helps the group leader understand whether the parent needs to learn more about some normal developmental milestones for the specific age of the child.

To make goals achievable, they should be stated in a manner that is positive, (e.g., what the parent wants to see the child doing) and they need to be realistic and age appropriate. Another way to think about helping parents and caregivers set goals is to have them think of the positive opposite behavior they want to see that replaces the negative behaviors they want to decrease. It is tempting to ask parents questions such as: What have you tried in the past? or What kinds of things can you think of that might work? However, it will be important for the IY coach to wait to problem solve or give advice until the parents have defined and agreed upon their short and long term goals. Even then, the IY model is not about therapists solving the problem and telling parents what to do. Instead, once goals are well defined, the

therapist and parent will begin a collaborative process of discussing the program content and applying it to the parents' goals.

It is also important for group leaders to help parents talk about their children's strengths and interests. For example,

Coach: *What aspects of your child's personality or temperament do you most enjoy?*

Parent: *He is very bright, always exploring things and not afraid to try out anything. He is very interested in animals and has learned about many kinds of birds and can name them.*

During this goal setting process the parent or caregiver may also realize there are some parenting behaviors they would like to change as well as child behaviors. Parents are encouraged to come up with some goals for themselves. (e.g., "I want to learn to stay calm and yell less"). Parents and caregivers can identify problem areas for themselves as well as recognize their strengths and goals for their own behavior. For example:

Parent Problem Area: *When my child tantrums in grocery store I end up yelling and that makes things worse.*

Parent Strengths: *I can keep my cool and I feel like I am a good parent.*

Goal: *Be able to react calmly in the grocery store when my child throws a tantrum.*

Once goals have been identified the IY coach can tailor the program by selecting vignettes, setting up practices, and creating home assignments that are in line with parents' and caregivers' goals.

Explaining the Incredible Years Program and Home Visit Methods

Once the IY coach understands the parents' goals then s/he explains how the IY program and content is designed to address some or all of the goals the parents has listed. For parents involved in the IY parent group, this will be a brief discussion providing parents with a chance to ask any further questions about the program philosophy and how the program addresses their goals and values. For parents not involved in the group, the IY coach will show them the Parent Pyramid and will explain the Incredible Years program philosophy, topics and how each component of the program addresses each of their goals. For example,

Coach: *The first topic we will discuss today is child-directed play; this skill will help you with your goal to help your child have more language and friendship skills and will build your enjoyment of being with your child. You will be learning ways to communicate with your child that help build his language skills as well as ways your child can talk with other children.*

The IY coach will also explain the basic format structure and schedule for each 1-hour visit. The coaches will review the use of video vignettes, coached practices with their children, home activities assignments and goal setting each week.

For example:

Coach: *Each week we will review your progress from the prior week and how you are doing achieving your weekly goals. Then we will look at some video vignettes together that I have selected based on your goals. We will discuss these vignettes together in terms of what is effective and what you might do differently. We will look at the benefits of various approaches for your children and for yourself as well as the barriers to trying out these ideas. After our discussion we will set up practice exercises with me or with your child so you can practice or rehearse the specific strategy. During this play practice, I may make some suggestions or model some particular strategy for you to try out. Afterwards we will debrief what you learned and how your child responded. At the end of our time together we will set new goals for the week which will involve child play activities and chapters to read. How does that sound?*

Showing Video Vignettes

Coaches select ahead of time appropriate vignettes for the family. If the parents are also in the IY group then the IY coach will check with the group leader and chose 1 or 2 different vignettes related to the topic that were not shown in the group. Parents not in a parent group will need to see more vignettes and will probably need at least 2-3 sessions for each topic. Selection of vignettes will be chosen to reflect the cultural identity of parents, age and developmental status of the children and the number of children parents are caring for at home. Examples of questions to ask for each video vignette can be found in the basic parent leader's guide.

There are a few things for the home IY coach to keep in mind as they use video clips to trigger a discussion or practice with a parent or caregiver one-on-one.

- The IY home coach should choose vignettes that best match the families' goals, culture, and child developmental level.
- The IY home coach can link parents' specific goals to vignettes when setting them up for parents and caregivers. For example, *"In this next vignette you are going to see a mother in the grocery store with her children, since your goal is to have more calm behavior from your children in the grocery store. Think about what this mother is doing that could be contributing her children's calm behavior."*
- A particular video vignette is paused several times so the IY coach can ask the parent or caregiver if they think something the parent in the vignette did would be worth trying to achieve their goal. The coach can ask the parent

- what she would do next and practice this idea. When the vignette is finished, the IY coach can help the parent to think about how she would put that principle or idea into real behaviors with her child.
- Children need to be provided with something else to do while the coach and parent are talking and viewing vignettes. Coaches may bring some special crayons, bubbles, puzzles, or books about the child's favorite topic to occupy the child while working with the parent. Parents can also be engaged in a discussion of what would work best for their children during the session. Coaches should provide children with incentives such as stickers, hand stamps and small treats for playing quietly. Not only does this keep the child occupied but models how to provide praise and rewards for the child's positive desired behavior.

The coach's task is to help the parents and caregivers understand how the Incredible Years video vignettes show behavior management principles that will be effective and relevant for achieving the parents' goals with their children. If parents seem skeptical of the strategies being recommended, the IY coach can help them complete the second *Parents Thinking like Scientists* handout to do a benefits and barriers exercise with them. For example, they can explore the benefits of ignoring instead of yelling when tantrums are occurring compared with the barriers or obstacles that make it difficult for them to stop their typical yelling responses. They can also help parents look at short term and long term benefits for particular strategies. For example, if parents understand that in the long term staying calm and ignoring helps children learn how to stay calm, they may be able to give up the short term benefits of yelling or threatening a child.

See Table 2

Coaching parents and children during play practices



After discussing 3-4 video clips with parents or caregivers, coaches set up practices using coached role-plays between parents and their children. The IY coach sets up these practices and role-plays in a gradual, sequenced way, starting with parent practice without the child being present, then progressing to coached scaffolded play times with the child, and finally providing less support as parents become more skilled and confident. Coaches will want to be sure they have appropriate toys for these practices such as blocks, Duplos, play dough, puppets or drawing materials. Coaches should bring a basket of these unstructured play activities with them in case parents do not have them in the home. Here is the sequence of setting up practices with parents and children.

1. **Set up a role-play first between the IY coach and parent.** This can be especially helpful if parents are learning and practicing a new skill for the first time. Sometimes it can be difficult for parents to implement a new skill with their child without knowing first what it looks like and sounds like. The IY coach starts by playing the parent role while the parent takes their child's role and then they can switch roles. This allows the parent to first see the behavior modeled by the coach and to experience its effects from the point of view of their child. Then they can try out the parenting strategy themselves while being supported with positive coach feedback. When the coach is in role as "child" s/he

does not misbehave in order to give the parent time to learn the skills before being challenged with misbehavior.

2. **IY coach scaffolded parent play with the child.** Next the IY coach suggests that the IY coach and parent play together with the child. The IY coach models skills such as being child-directed play, being an appreciative audience, and social and emotion coaching. During this type of practice the IY coach and parent take turns making statements during the play. Then as the parent feels more comfortable the IY coach can gradually step out of the play interaction into more of a supportive observer/ IY coach role.
3. **Coaching the parent and child.** The IY coach provides support while a parent is practicing new skills such as child-directed play with their child by being “an angel on the parent’s shoulder”. Coaches sit next to the parent and whisper to parents who need some extra help when trying out new skills.

For all of these ways of practicing new skills it will be important that the IY coach scaffolds the parent’s success by reviewing the parent’s goals and creating a “script” for the parent to use. For example a parent might have the goal of having their child share more frequently. The IY coach will first brainstorm with the parent ways to encourage and prompt sharing and then what statements/ comments they can make during the play. The home IY coach might suggest that if the child is not sharing, the parent can first model the desired behavior by offering to share their toy and say, “I would like to share my toy with you”.

After the role-play or practice is over, the learning will be strengthened when the IY coach processes how the parent felt either playing with the child or role-playing with the home coach. Positive feedback, specific praise and encouragement is very important to the practice learning.

Review of learning and home assignments

After debriefing the play practice, the coach and parent review the key learning for that session and read the refrigerator notes for the topic. Then they discuss the home assignments. Home assignments are an important part of the Incredible Years home coaching program and will be most effective when they are tailored to the parent’s goals and life situation.

At the end of the session, the IY coach asks the parent to complete the weekly self-monitoring checklist. On this from, the parent makes a commitment regarding how often they will do a play practice with their child each week using the new skills and what reading they will do. Having the parent put their commitment to completing the home assignment in writing will help with accountability and monitoring progress.

At the beginning of each home coaching session starting with session 2 the IY coach will spend the first 10 to 15 minutes of the session reviewing how the home assignment and practice went. During this time coaches will ask about their successes and their problems or difficulties and offer suggestions about ways to handle these. Coaches ask about the child's behavior in response to parents' play activities. This is time when home coaches can be cheerleaders for parents and celebrate their success. Some example questions include:

Coach: *Tell me about your experience with child-directed play?
Does your child enjoy the play time? Did you enjoy it?
How was it to use social and emotional coaching? What do you think
your child is learning from this approach?
What did you find difficult?*

For every session, parents will have the assignment of doing play sessions with their child; as the program progresses, there will also be other assignments to try new skills learned in the sessions (praise, sticker charts, ignoring). It is important to start with discussion of any efforts parents made to try out something new they learned from their last session. After learning about the parent's difficulties or obstacles then it is important for coaches to take some time to talk about ways to overcome the barriers. For example, if a parent had agreed to practice child-directed play in the prior session but they tell the coach they did not have time to do this, then the coach explores the barriers to doing this assignment. For example:

Coach: *What got in the way of finding time to do the play activities?*

Parent: *I was too busy with my job and doing laundry and getting the children fed and ready for bed when I got home. I was just too tired to do this.*

Coach: *Could you possibly use any of these child-directed play activities when you are folding laundry, or giving your child a bath, or driving home from school? Could you sing when you are making dinner?*

It is important the parents understand how many of the child-directed play and social and emotional coaching language as well as praise and rewards could be used at other times of the day in their interactions with their children and not just during a formal play time with toys.

For parents who do achieve their goals for play times or reading, or even partially complete their goals it is important for coaches to provide enthusiastic praise for their steps at making change in their interactions. Coaches can provide small rewards for success such as special tea, lotion, small treat, or parent tool award certificate.

Sample Session Structure

We have discussed all of the important elements in order to engage a parent in a home coaching session. The first home visit will primarily be spent learning about the family culture and values and the child's problems and strengths and developing goals. Hopefully there will be some time for learning by showing a few video vignettes related to child-directed play. The following is a sample of subsequent home schedule time table (90 minutes).

1. Begin by joining with the parent reviewing home activities, weekly goals and successes and barriers to achieving the goals. Problem solve ways to overcome obstacles (15 minutes)
2. Start new teaching by referring to the Incredible Years pyramid and link in with the parent's goals (5 minutes)
3. Show approximately 2-4 child-directed play vignettes while pausing for reflections and questions (30 minutes)
4. Complete a child-directed play practice and debrief (20 minutes)
5. Discuss the next weeks home assignment, have parent fill out the self monitoring goal sheet, and an evaluation, schedule next week's appointment (15 minutes)

Summary

The IY home-based program holds promise for providing added support for parents attending the IY group-based program. It can be used either to provide additional personalized practice for parents with their children at home, or as a make-up session if they have missed a group session. The IY home-based model can also be used to deliver the entire program one-on-one at home. More research is needed to evaluate the added benefits of either using the program as a supplement to the IY group or as a stand alone, one-on-one approach. However preliminary studies evaluating both these approaches suggests that the IY group plus home-based support serves to help parents sustain positive parenting changes in the longer term (Lees & Fergusson, 2015) . The fully home-based model appears to be particularly effective for high risk parents, parents with scheduling conflicts, or parents experiencing other interpersonal or health factors (Dionne et al., 2009). The flexibility and ease of delivering the IY model in a family's home may allow agencies to better meet the needs of high risk families and especially families living in rural areas who cannot access a group-based program in order to promote their children's optimal growth and development.

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Table 1 Parents Setting Goals

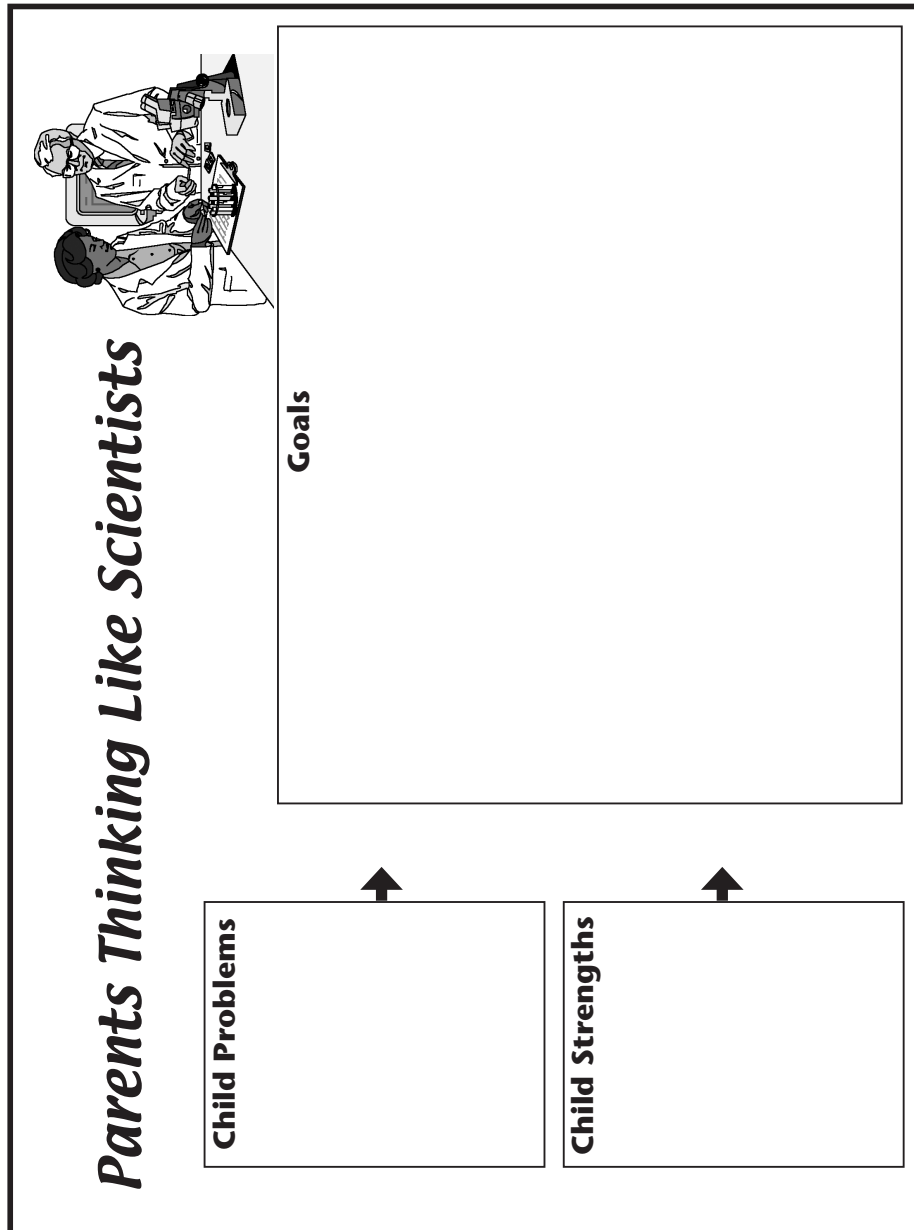


Table 2: Exploring Benefits and Obstacles

