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Entwicklung und Evaluation von Trainingsprogrammen zur Förderung elterlicher Scaffolding-Kompetenzen und ihr Einfluss auf die Entwicklung der Selbstregulation in der frühen Kindheit

One of the hallmarks in early childhood is the development of self-regulation (Flavell, 1985). Parents as primary caregivers play a central role during this period. By acting sensitively and by providing cognitively stimulating learning environments (i.e. *scaffolding*; Woods, Bruner, & Ross, 1976), parents help their child internalize skills and strategies necessary in problem solving and emotionally demanding situations and improve self-regulatory skills (Carlson, 2003).

One group of interest are parents and their preterm born children. A considerable amount of outcome studies report an increased risk for cognitive and self-regulatory deficits in preterm children, even in the absence of major disabilities (e.g. Bhutta, Cleves, Casey, Craddock, & Anand, 2002; Clark, Woodward, Horwood, & Moor, 2008). In addition, parents of extremely preterm born children tend to behave more intrusively and less sensitively in interaction with their child (Clark et al., 2008).

It thus seems promising to support parents, and especially those of preterm born children, in providing cognitively stimulating learning environments and in disposing sensitivity in interactions with their child. Up until now, however, there is a lack of interventions focusing on these parental behaviours to support their toddler's cognitive and socio-emotional development.

In my dissertation project I develop and evaluate training programmes that aim at improving parents' scaffolding skills (basic training), scaffolding and sensitivity skills (combined training) or stress management skills (control group). Of special interest to me is, 1) if parents' scaffolding behaviour can be improved by the training programmes, 2) how these parental trainings effect children's development of self-regulation, and 3) if parents of preterm born children benefit more from the interventions than parents of term born children do.

Methodology:

The project is based on a quasi-experimental 2 (parent-child-dyads: preterm vs. full-term) x 3 (treatment: basic training, combined training, control group) design. 105 parent-child-dyads of each group (preterm and full term, children's age: 24-36 months) will be randomly allocated to three treatment groups (basic training, combined training, control group).

- 1.1. Based on a multi-method approach, questionnaires and parental self-reports, video observation of parent-child- interactions and standardized test batteries will be used

to assess the efficiency of the trainings as well as children's cognitive development and development of self-regulation. All measurements will be applied at several times (pre and post treatment and at follow up).

- 1.2. I focus especially on the observation of parent-child-interactions in different semi-standardized situations (free play and problem solving tasks). Parent-child-interactions will be videotaped and analysed using an observation tool, which I currently develop. By using this self-developed observation tool I will be able to assess parent and child behaviour on a global as well as micro-analytic level, analysing the quantity, time course and quality of parents' use of scaffolding strategies, as well as children's responses to parental support.

Keywords: parent-child-interaction, self-regulation, intervention, multi-method approach, quantitative research methods, video observation

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