

Training Parents: What impact does it have on children's ability to maintain and generalise skills learnt in smiLE Therapy? (Martina Curtin and Dr. Ros Herman)

Research Project



over to you

Background

Deaf children can have difficulties in understanding and applying social norms (Stinton & Whitmore, 2000). SmiLE Therapy aims to develop the everyday communication skills of deaf children so that they can be confident, independent communicators within the hearing world. A chosen social situation is broken up into smaller component skills and displayed using the 'Communication Skills Checklist' (below). With SLT guidance, progress is charted at both time points by the child, as they watch back and self-evaluate their own pre- and post-therapy videos.

Many researchers have shown that the quality of parental involvement influences children's developmental outcomes (Wittkowski et al., 2017); it therefore seemed fitting to include parent training as a strategy to aid the generalisation of child skill.

Method

This project has a repeated-measures, within-subject, mixed-method design.

31 deaf students aged between 7 – 14 (and their parents) were recruited from four deaf provisions. SmiLE Therapy took place once a week for 45-60 minutes for six weeks, in groups of three to five children. Children were assessed on the CSC (pictured below) pre-, post- and 3 months post-therapy. Parents were invited to attend two training sessions to encourage generalisation work in the community. Generalisation was assessed through parent-made videos of their children in shops and cafes. The wider impact of the therapy and training was also discussed in parent focus groups.



Next Steps

- Analyse qualitative data.
- Share outcomes and implications.
- Continue to focus on upskilling parents to support their child's communication skills outside of school.
- Consider further development of tools that capture the wider impact of parents putting smiLE therapy strategies into practice.

smiLE Therapy - Communication Skills Checklist (CSC)

smiLE Therapy module: Requesting in an office and HoCS

	Knock and enter	Close door quietly	Stay in a good place	Friendly face	"Hello"	"I'm deaf"	Know what you need	"Can I have please"	Confusion? Strategy used?	More confusion? Strategy used?	Friendly face	"Thank you"	"Bye bye"	Close door quietly	Right thing?
Before therapy															
After therapy															

(a) spoken English (b) repeated (c) point (d) gesture (e) write / draw
 Communication Skills Checklist for deaf students for Module 4

Results

All 31 pupils improved from pre-therapy (average score 40%) to post-therapy (average score 96%); a Wilcoxon test indicated this was significant ($z = -4.861, p < 0.001$). When presented with the same task 3-4 months later, pupils maintained an average of 89% of the skills taught. Parent training had no effect on maintenance score.

17 videos were collected to assess generalisation. In a new situation, pupils used 67% of the skills taught in smiLE Therapy. Pupils whose parents received the smiLE training performed better in community tasks.



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