FIRST-GENERATION LATINA MOTHERS' EXPERIENCES OF SUPPLEMENTING

HOME-BASED EARLY HEAD START WITH THE ATTACHMENT AND BIOBEHAVIORAL

CATCH-UP PROGRAM

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ABSTRACT: This qualitative pilot study examined first-generation Latina mothers' experiences of supplementing home-based Early Head Start (EHS) services with the evidence-based Attachment and Biobehavioral Catch-up (ABC; M. Dozier, O. Lindheim, & J. Ackerman, 2005) program. Ten low-income, first-generation Latina mothers with infants and toddlers enrolled in home-based EHS were provided 10 ABC home visits by a supplemental parent coach. Following delivery of ABC, mothers participated in in-depth, semistructured, qualitative interviews about their experiences. Interview themes included positive experiences of both EHS and the ABC, a high value placed on receiving both programs, and cultural relevance of the ABC program for Latino families. Participants offered several suggestions for improved program delivery. Study findings suggest that a model of EHS supplemented by ABC delivered to the Latino community is feasible, valuable to participants, and culturally relevant. Considerations for sustainability of this supplemental model are discussed.

Keywords: attachment-based intervention, parenting, mother-child interaction, Latino

RESUMEN: Este estudio piloto cualitativo examinó las experiencias de madres de origen latino de primera generación al complementar los servicios del programa "Early Head Start" (EHS) basado en casa con el programa ABC (Alcance de Afectividad y Bio-Conducta) que se basa en la evidencia. Diez madres de origen latino, de primera generación y bajos recursos económicos matriculadas con sus infantes y niños pequeños en EHS basado en casa, recibieron 10 visitas a casa del programa ABC por parte de un progenitor/entrenador designado para complementar. Después de las visitas de ABC, las madres participaron en profundas y semiestructuradas entrevistas cualitativas acerca de sus experiencias. Entre los temas de la entrevista estaban las experiencias positivas tanto de EHS como de ABC, un alto valor asignado al hecho de recibir ambos programas, y relevancia cultural del programa ABC para familias de origen latino. Las participantes ofrecieron varias sugerencias para mejorar la manera como el programa es presentado. Los resultados del estudio sugieren que un modelo de EHS complementado con hacerles llegar el programa ABC a la comunidad de origen latino es factible, de mucho valor para quienes participan y culturalmente relevante. Se discuten las consideraciones de cómo sostener este modelo complementario.

Palabras claves: intervención con base en la afectividad, crianza, interacción madre-niño, Latino

RÉSUMÉ: Cette étude pilote qualitative a examiné les expériences de mères Latinas de première génération aux Etats-Unis, expériences du programme américain *Early Head Start* (EHS) supplémentaire à domicile avec le programme *Attachment and Biobehavioral Catch-Up* (ABC, en anglais, soit Rattrapage d'Attachement et Biocomportemental). Dix mères Latinas de première génération de milieux défavorisés et leurs bébés et petits enfants, inscrites dans un programme EHS à domicile, ont reçu 10 visites à domiciles ABC par un entraîneur parental supplémentaire. Après les visites ABC les mères ont participé à des entretiens semi-structurés, qualitatifs, de profondeurs, sur leurs expériences. Les thèmes des entretiens ont comporté des expériences positives de l'EHS et de l'ABC, une grande valeur a été accordée au fait de pouvoir profiter de plusieurs programmes, et de la pertinence culturelle du programme ABC pour les familles Latino. Les participantes ont proposé plusieurs suggestions pour améliorer l'exécution du programme.

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Les résultats de l'étude suggèrent qu'un modèle de EHS avec l'ajout de l'ABC présenté à la communauté Latino est faisable, et s'avère précieuse pour les participantes et pertinente du point de vue culturel. Des considérations afin de rendre ce modèle supplémentaire viable sont discutées.

Mots clés: intervention basée sur l'attachement, parentage, interaction mère-enfant, Latino

ZUSAMMENFASSUNG: Diese qualitative Pilotstudie untersuchte die Erfahrungen von lateinamerikanischen Mütter der ersten Generation mit dem evidenzbasierten Programm "Attachment and Biobehavioral Catch-up" (ABC) ergänzend zu hausbesuchsbasierten Frühinterventionsprogrammen (EHS).

Zehn lateinamerikanischen Müttern der ersten Generation mit niedrigem Einkommen, die mit ihren Säuglingen und Kleinkindern an einem hausbesuchsbasierten EHS teilnahmen, wurden 10 ABC-Hausbesuche ergänzend zur Verfügung gestellt. Im Anschluss an die ABC-Sitzungen nahmen die Mütter an ausführlichen, halbstrukturierten, qualitativen Interviews zu ihren Erfahrungen teil. Die Themen der Interviews umfassten die positiven Erfahrungen mit EHS und ABC, die hohe Wertigkeit, an beiden Programmen teilzunehmen und die kulturelle Relevanz des ABC-Programms für lateinamerikanische Familien. Die Teilnehmer lieferten mehrere Vorschläge für eine verbesserte Programmumsetzung. Die Ergebnisse der Studie legen nahe, dass ein EHS-Modell, welches durch ABC ergänzt wird, für die lateinamerikanische Community realisierbar, wertvoll und kulturell relevant ist. Überlegungen zur Tragfähigkeit dieses zusätzlichen Modells werden diskutiert.

Stichwörter: bindungsbasierte Intervention, Erziehung, Mutter-Kind-Interaktion, Lateinamerikaner

抄録: この質的パイロット 研 究では、在宅早期ヘッドスタートhome-based Early Head Start (EHS)サービスを、根拠に基づく愛着と生物行動学的キャッチアップAttachment and Biobehavioral Catch-up (ABC)プログラムで補う、第1世代ラテン系母親の経験を調査した。在宅EHSに登録した、乳幼児を持つ低所得の第一世代のラテン系母親10人が、補助的な親のコーチによる10回のABC家庭訪問を提供された。ABCの提供後、母親達は彼女達の経験についての詳細な半構造化質的インタビューに参加した。インタビューのテーマには、EHSとABCの両者のポジティブな経験、両方のプログラムを受けることに置かれている高い価値、そしてラテン系家族にとってのABCプログラムの文化的な関連性が含まれた。参加者は、プログラムの提供の改善についていくつかの示唆を提供した。研究の所見から、ラテン系のコミュニティへのABCの提供によって補われたEHSモデルは実行可能であり、参加者に貴重であり、そして文化的に関連性があったことが示唆される。この補完モデルの持続可能性について考察される。

キーワード: 愛着に基づく介入,養育(育児),母親と子どもの相互交流,ラテン系

摘要:這個定性試驗研究調查在第一代拉丁裔母親中,用證據為本依附和生物行為追趕式干預(ABC)來補充以家庭為基礎的早期啟蒙方案(EHS)之經驗。10位低收入、第一代拉丁裔、其嬰兒或幼兒就讀於EHS的母親,由輔助育兒教練提供10次ABC家訪。之後母親參加深入半結構化定性訪談,敘述他們的經驗。採訪的主題包括EHS和ABC的正面經驗、接收兩個節目干預的高值、和ABC干預對拉丁裔家庭的文化相關。與會者提出若干改進傳送干預的建議。研究結果表明,在拉丁裔社區,以ABC補充EHS傳送模式是可行的、對參與者有價值、並與其文化相關。作者討論此補充模型的持續可能性。

關鍵詞: 基於依附的干預, 育兒, 母子互動, 拉丁美洲人

ملخص: تناولت هذه الدراسة الوصفية تجارب الأمهات من أصل لاتيني عن إضافة برنامج التعلق واللحاق البيوسلوكي ABC إلى خدمات البرنامج المنزلي Head Start . اشترك 10 أمهات محدودي الدخل من الجيل الأول من أصل لاتيني في خدمات البرنامج المنزلي (EHS) وتم إمدادهم بعشرة زيارات منزلية تابعة لبرنامج ABC من خلال مدرب أبوة وأمومة إضافي . بعد إتمام برنامج (ABC) اشتركت الأمهات في مقابلات شخصية مطولة شبه مجهزة عن تجاربهم الشخصية مع البرنامج . اشتملت نتائج المقابلات على تجارب إيجابية عن كلا من (EHS) و (ABC) مع التأكيد على ميزة الحصول على كليهما معا وعلى الملائمة الثقافية لبرنامج ABC بالنسبة للعائلات الملاتينو . قدم المشاركون عدة مقترحات لتحسين تنفيذ البرنامج. تشير نتائج الدراسة إلى أن نموذج ملائم وقابل للتطبيق مع مجتمع اللاتينو وله قيمة ثقافية واجتماعية لهم . وتناقش الدراسة إمكانية استمرارية هذا النموذج الإثرائي وتطبيقه على نطاق واسع .

كلمات مفتاحية: تدخل يعتمد على التعلق – الأبوة والأمومة – تفاعل الأم والطفل – اللاتينو

* * *

If you talk to a man in a language he understands, that goes to his head. If you talk to him in his language, that goes to his heart. Nelson Mandela

The Attachment and Biobehavioral Catch-up (ABC) program, developed by Dozier, Lindheim, and Ackerman (2005),

is a brief, high-intensity, attachment-focused parenting intervention. The ABC program has undergone rigorous testing in multiple randomized control trials and is considered "evidence-based" (Bernard, Dozier, Bick, & Gordon, in press; Bernard et al., 2012; Bernard, Hostinar, & Dozier, 2015; Bick & Dozier, 2013;

California Evidence-Based Clearinghouse, 2015; ChildTrends What Works, 2015). Previously tested in very high risk samples, the ABC program also holds promise as a supplement to existing services for a more general population of low-income families. In particular, promoting supportive parenting can help buffer the effects on young children of families' prolonged exposure to the myriad stressors associated with poverty (Shonkoff et al., 2012).

The first goal of the current project was to examine the feasibility of supplementing federally funded, home-based Early Head Start (EHS) services with the ABC program. The second goal was to explore first-generation Latina mothers' experiences of receiving both home-based EHS and the ABC. Latinos comprise an increasingly large share of the low-income families served by EHS (Administration for Children and Families, 2014). This is the first known study to explore the model of EHS plus the ABC and to examine specifically ABC implementation with first-generation Latino families. It also is the first known qualitative study of the ABC, offering important insights into mothers' experiences of this key infant mental health intervention.

EHS: EXISTING AND NEEDED PARENTING SUPPORTS

The past 20 years have witnessed a proliferation of Early Head Start and other publicly funded programs designed to promote early child development among families living in poverty (National Research Council and Institute of Medicine, 2000). Supporting early child-parent relationships is a prominent goal of such programs, in addition to numerous other goals such as promoting child health, child cognitive and language development, family relationships, and family economic well-being. The multisite longitudinal Early Head Start Research and Evaluation Project (EHSREP; N = 3,001) has illustrated numerous, consistent, modest program effects on observed parenting for the sample as a whole, particularly for families receiving home-based EHS services (Administration for Children and Families, 2002; Love et al., 2005). For example, EHS mothers were observed to be more supportive (sensitive, positive, and cognitively stimulating) toward their children, who, similarly, were observed to be more engaged with their mothers than were those randomly assigned to the control group. Moreover, EHS children received fewer spankings than did control children, and were reported by their mothers to be less aggressive (Love et al., 2005). Despite these average gains, several studies have indicated that EHS is not equally efficacious for all families (e.g., Berlin et al., 2011; Raikes, Vogel, & Love, 2013). Researchers and practitioners have suggested that some EHS recipients would benefit from more intensive and/or attachment-focused parenting services (Raikes et al., 2013).

THE ABC AS A PARENTING SUPPLEMENT TO EHS

Poverty and related stressors can compromise parents' abilities to provide sensitive and responsive care to their infants, which in turn poses significant challenges for infants' developing attachment security (Cyr, Euser, Bakermans-Kranenberg, & van IJzendoorn,

2010). At the same time, secure early attachments serve as a protective factor for infants who, without their caregivers' support, would be more vulnerable to poverty's toxic effects (Belsky & Fearon, 2002). Several attachment-based interventions have been shown to improve rates of infant-parent attachment security among high-risk dyads, including Child-Parent Psychotherapy, the Circle of Security program, and ABC (for a review, see Berlin, Zeanah, & Lieberman, 2016).

Given the potential benefits of attachment-based interventions for at-risk infant-parent dyads, there is great impetus to offer these programs on a larger scale. Important progress on communitybased implementation is in fact being made (Berlin et al., 2016). Of the evidence-based attachment programs, Dozier's ABC program offers a strong model for replication and "scale up" in a community setting because it is relatively brief and consists of structured intervention activities. The ABC program is delivered in 10 home-based sessions led by a trained parent coach. Each session includes both mother and child together, addresses a specific topic, and includes a review of video-recorded mother-infant interaction. Although brief, the ABC program is intensive and provides explicit parent coaching in reference to three behavioral targets: (a) nurturance, (b) following the child's lead with delight, and (c) reducing frightening caregiving behavior. Three randomized trials have demonstrated the efficacy of the ABC for improving parenting behaviors, infant attachment security, and child stress regulation at both behavioral and physiological levels (Bernard, in press; Bernard et al., 2015; Bick & Dozier, 2013; for similar results in a pilot RCT with very high risk mothers and infants, also see Berlin, Shanahan, & Appleyard Carmody, 2014). The parent coaches provide "in the moment" (ITM) commenting related to the three target behaviors exhibited during the session itself. ITM commenting offers live feedback and support to mothers, and is a key mechanism of program effects (Bernard et al., 2012; also see Berlin et al., 2016).

THE ABC FOR LOW-INCOME LATINO FAMILIES

Latino children are the largest group of young children in the United States, and their families are disproportionately more likely to live in poverty than are their White or Asian counterparts (Addy, Engelhardt, & Skinner, 2013). Latino children make up approximately 35% of the children served by Early Head Start (Administration for Children and Families, 2014). Latino families, families who speak another language than English, and families in which one or more adults are foreign born also are more likely to receive home-based EHS services (as opposed to center-based or combined services; Vogel et al., 2011). Moreover, low-income Latino immigrant families may experience unique risk factors such as trauma from leaving family or children in their country of origin, acculturative stress, undocumented status, and social isolation, all of which can compromise family relationships and supportive parenting (e.g., Kaltman, Hurado de Mendoza, Gonzales, Serrano, & Guarnaccia, 2011; Perry, Ettinger, Mendelson, & Le, 2011).

More intensive parenting supports may be especially beneficial for Latinos who are experiencing multiple stressors. There is a growing body of literature on the extension of specific parenting interventions to Latino families (Mejia, Calam, & Sanders, 2015; Parra Cardona et al., 2012). Despite inclusion of Latinoheritage families in some attachment-based interventions (e.g., ABC, Bernard et al., 2012; Child Parent Psychotherapy, Van Horn et al., 2012), there has yet to be an explicit examination of first-generation Latinos' experiences within these programs.

In extending an evidence-based practice such as the ABC into a new cultural community, questions arise about how the program will be received; in particular, whether program goals, methods of delivery, and content are relevant and culturally acceptable to participants. Parents' norms for childrearing are strongly influenced by their cultural communities and families of origin (Super & Harkness, 2002). Parenting interventionists need to be cognizant of the fit between program messages and parents' beliefs (Van Horn et al., 2012). At the same time, many scholars have cautioned against significant changes to "core elements" of an evidence-based practice without strong reasoning for why the original model would be ineffective in the new population (Barrera & Castro, 2006). Without changing core elements, adapting "surface elements" such as language, program materials, and race/ethnic backgrounds of interventionists have been discussed as important for adequate program enrollment, conveying respect, and engaging families (Barrera & Castro, 2006; Mendez, Westerberg, & Thibeault, 2013; Parra Cardona et al., 2012). Once these relatively minor modifications have been made, researchers and interventionists can explore whether core elements as planned are meaningful and effective with the new population.

THE CURRENT STUDY

The current pilot study was conducted to inform the development of a randomized controlled trial to test the efficacy of supplementing EHS with the ABC. The current qualitative study provides an in-depth examination of the feasibility and experiences of mothers receiving home-based EHS plus 10 ABC sessions provided by a supplemental parent coach. The research team partnered with six EHS programs that expressed interest in offering supplemental parenting services and willingness to participate in research. These programs served mainly Latino families. The current study addressed the following research questions:

- **RQ1**: What is the feasibility of providing the ABC parenting program as a supplement to home-based EHS services for low-income, first-generation Latina mothers and their young children?
- **RQ2**: What are low-income, first-generation Latina mothers' experiences of simultaneously receiving home-based EHS services and the ABC program?
- **RQ3**: How do low-income, first-generation Latina mothers perceive the fit between the ABC program and their family and community values about parenting?

METHOD

Sample

Participants were recruited from four of the six sites selected to participate in the larger randomized controlled trial. Participants were recruited using a purposive sampling strategy based on anticipated eligibility criteria for the larger trial. For the current pilot study, 17 mothers were invited to receive the ABC. Fifteen of these 17 mothers (88%) agreed to participate, and 2 declined. Twelve of the 15 who agreed to participate (71% of the original 17) actually participated. Of the 3 mothers who did not participate, 1 was subsequently determined to be ineligible (due to the child's age), and 2 mothers' schedules changed shortly after recruitment (One started a new job; another was about to give birth to a second child, by which time the target child would be ineligible due to his age.) All 12 mothers (100%) completed all 10 ABC visits. The 10 ABC sessions were delivered over an average of 14.9 weeks (range = 10-20). Of the 12 mothers in the pilot study, 10 were Latina. This article focuses on these 10 Latina mothers' experiences of receiving ABC as a supplement to EHS home-based services in an effort to inform a culturally grounded understanding of this model for Latino families.

At the time of post-ABC qualitative data collection, mothers had been enrolled in EHS for between 1 and $2\frac{1}{2}$ years. All mothers were living in the mid-Atlantic region and were originally from Latin America, including 5 mothers from El Salvador, 2 mothers from Guatemala, and 1 mother each from Honduras, Peru, Chile, and Mexico. Mothers ranged in age from 23 to 39 years (M=26, SD=6). Infants' ranged in age from 14 to 26 months (M=20, SD=4). Maternal education levels varied between completing elementary school and having some college education. Most (70%) participants lived with a partner or spouse. All mothers spoke Spanish as their first language.

Since concluding the pilot study, the randomized controlled trial (RCT) has begun. RCT data collection includes additional psychosocial characteristics beyond those collected from participants in the pilot study. However, the pilot study participants and the RCT participants appear to have similar characteristics. Preliminary analyses of data from the larger randomized trial indicate that mothers range in age from 18 to 45 years (M=30). Approximately half (52%) have not completed high school, and 63% are unemployed. Seventy-six percent (76%) are married or living with a partner. Over one third (35%) of the mothers have reported a history of at least one form of childhood maltreatment. Over one fourth (26%) of the mothers have reported at least some experience of intimate partner violence. Approximately 16% have reported depressive symptoms in the clinical range.

Provision of the ABC Program

Three female parent coaches delivered ABC. All were fully bilingual English/Spanish speakers originally from El Salvador, Guatemala, and Mexico, respectively. ABC parent coaches require a minimum of a bachelor's degree. Two of the three parent coaches

in the current study had Master's degrees. All coaches received an initial 2-day training with Dr. Dozier and her team. The ABC manual and parent homework materials were translated into Spanish by a professional translation service with extensive experience with social science research and with familiarity of the target population. All parent coaches also gave input into the translations.

In accordance with the ABC program certification protocol, each parent coach received weekly video-based supervision from a member of Dr. Dozier's team until achieving proficiency in delivering ABC with fidelity (~1 year). Supervision focused on overall adherence to the ABC manual and intervention themes and on the number and type of in-the-moment comments provided by the parent coach.

The parent coaches provided ABC sessions in English or Spanish, depending on the mothers' preferences. In the current pilot study, 9 mothers (90%) received ABC in Spanish, and 1 received ABC in a combination of Spanish and English. In addition to the supervision provided by the ABC team, the co-principal investigator, a social worker and clinical-developmental psychologist, conducted weekly reflective supervision with each parent coach.

Procedures

All procedures were approved by the authors' Institutional Review Board prior to beginning the study. Shortly after their completion of the ABC program, in-depth qualitative interviews following a semistructured interview guide were conducted in participants' homes by the first author and a trained graduate research assistant. Both interviewers were bilingual (English/Spanish) and interviewed the mothers in English or Spanish, depending on the mothers' preferences. Nine of the 10 interviews (90%) were conducted solely in Spanish; one was in English and Spanish. Mothers were asked to describe typical visits by EHS home visitors and ABC coaches. They also were asked to share their understanding of the goals of the visits and any benefits that they had experienced as well as any problems or inconveniences that had they encountered in receiving both services. Participants were compensated \$50 for the time devoted to the qualitative interview. The interviews were recorded and transcribed verbatim by bilingual, trained graduate and undergraduate research assistants. Each transcription was checked against the audio file by a second transcriptionist to ensure accuracy. Spanish transcripts were translated into English by bilingual research assistants.

Data Analysis

The first and second authors used a team-based approach to conduct a template analysis of the data, yielding dominant qualitative themes among participants (Crabtree & Miller, 1999; Padgett, 2008). First, each team member individually coded the same set of three transcripts line by line. Following a meeting to discuss pertinent codes and emerging themes, a group codebook was created. We revised the codebook at several points during the analytic process to reflect additional codes needed to fully capture the range of participants' experiences. The team then analyzed the remaining transcripts in sets of three using the group codebook, meeting between each set to review coding and emerging themes. The team met approximately twice per month during analysis for peer debriefing and discussion. When disagreements occurred, team members discussed how best to describe participants' experiences until reaching consensus. Each team member kept a process journal with memos throughout data analysis to record observations and impressions. Final themes are presented next.

RESULTS

Mothers simultaneously receiving home-based EHS services, and the ABC program described many experiences that illuminated their perspective on simultaneously participating in both programs. Analysis of participants' interviews revealed four major themes: (a) Mothers' experiences of Early Head Start, (b) Mothers' experiences of ABC, (c) Integrating EHS and ABC, and (d) Cultural congruence between ABC and family and community values.

Theme 1: Mothers' Experiences of EHS

Many reasons for joining. Mothers noted a range of reasons why they initially enrolled in EHS. The most common reason was hearing from other mothers about the benefits of the program. This theme thus highlights the importance of community engagement regarding EHS enrollment. Other mothers expressed appreciating the chance to prepare their children for school, gain opportunities for children's socialization, and learn about child development as motivation for entering the program.

Many benefits. Mothers described a wide range of benefits to participation in EHS, including (a) expanding their children's vocabulary and early reading skills and (b) getting out of their homes to spend time with other EHS mothers and children during socialization activities. One mother shared her thoughts:

For me, the thing from this program is ... it's a great help because I really did not have any experience ... but then the [Early] Head Start program [began and I learned] what it could do with the children [and] how we [as mothers] can help with this also. [We can] help them to learn language, the names of things, the colors . . . That benefit for me is huge because you're helping, we're helping . . . me and my baby, and many other babies. [I am learning] how to be able to begin teaching [my daughter] at an early age, before she goes to school. Prepar[ing] them for when they can go to school, for me, that is very important. (Mother from Guatemala with an 18-month-old)

Supportive, highly valued EHS home visitors. Every study participant reported having a "very good" or "excellent" relationship with her EHS home visitor. In addition to their work supporting the children, home visitors appear to serve an important social function for the participating mothers who were home, often alone, each day with their children and had limited social support.

TABLE 1. Mothers' Reported Benefits of the Attachment and Biobehavioral Catch-up Program

Learning How To Remain Calm	Learning How To Follow the Lead	Learning To Dedicate Time to My Children
Seeing How My Daughter Reacts and How I Respond	Working Out Different Opinions About Parenting in the House	Learning I'm Headed in the Right Direction
Learning How To Let Kids Do What They Want With Their Own Toys	Learning if Your Child Falls, To Pick Them Up Quickly and Hug Them	Learning How Kids Express Themselves
Becoming More Tolerant	Learning How Much Children Need Their Mothers' Affection	Seeing Myself "Before and After" in Videos
Exploring Myths About Parenting	Having Written Materials To Go Back To	Getting a Video Montage of Session Moments at the End
Learning To Respond With Delight to My Child	Learning To Follow My Child's Interests	Learning How To Give My Child Love
Learning How To Not Always Say "No, You Have It Wrong"	Learning How To Bond With My Child	Helping Me To Be a Better Mother
Helping Me See There Are Alternatives To Spanking	Giving Love and Care	My Child Has Opened Up, and Will Now Go and Explore

Now more than ever, I already don't see her anymore as just some person that comes, she is like a friend. For me, she is fantastic ... she has helped me a lot. (Mother from El Salvador with a 2-year-old)

It's like having a friend [laughs] yes ... it is a lovely relationship. Yes, sometimes, for example, when she comes, even the baby, I say [the home visitor] is coming and she gets ready with her pencil ... because she likes to draw ... I see that she loves her job because she always comes prepared and everything for the visits that we do. And my relationship with her? Very good. (Mother from Guatemala with an 18-month-old)

Challenges to participation. Although several of the mothers said they had experienced no problems at all while participating in Early Head Start, other participants described several difficulties. Some mothers reported issues of staff turnover and changes in their home visitors. Several challenges were discussed related to negotiating the home visitor's plan for the visit versus what the baby was willing and able to do at that time due to loss of interest, fussiness, or illness.

Theme 2: Mothers' Experiences of ABC

Extensive benefits of ABC. Every mother in the program stated that she "loved" being in the ABC program and highlighted many benefits (see Table 1). The most commonly mentioned benefit was learning to follow the child's lead rather than the mother leading activities during interactions with her baby. Mothers described

learning how to let their children enjoy their own toys and "giv[e] them a childhood," something several mothers in the study stated that they did not have while growing up. Five mothers cited learning to follow their children's lead as the most helpful aspect of the program. One mother stated:

[The ABC sessions] were very beneficial to me because there were things I did not realize like, for example, following the child's lead, to let them discover things and not say, "no that is not how it's done." (Mother from El Salvador with a 15-month-old)

In addition to following their child's lead, several mothers found it helpful to receive instruction and support in reading their children's cues for nurturance and for a desire to explore, which helped them both to follow their child's lead and to provide "amor, atención, y cariño" (love, attention, and care). Nearly all of the mothers noted that a specific benefit of ABC was learning the importance of nurturing their children, particularly when the child was in distress, and even when the mother may be otherwise occupied. One mother explained:

We, as parents, well ... there is a lot that we have going on. Oh, well the majority of parents work. And I think that we don't pay enough attention to [the babies, or give] attention and affection. When the baby bumps himself, [we tend to say] "Everything is ok" just like that, like it was nothing. Or there are times that we just let them keep crying, the babies. We don't give them anything, like say to them, "Ay you poor thing, my baby" that they look for [from] you as a parent. I feel that [the ABC program] teaches a lot

TABLE 2. Summary of Study Themes and Subthemes

Theme 1: Mothers' Experiences of Early Head Start	Many Reasons for Joining	Many Benefits	Supportive, Highly Valued Early Head Start Home Visitors	Challenges to Participation
Theme 2: Mothers' Experiences of Attachment and Biobehavioral Catch-up (ABC)	Extensive Benefits of ABC	Differences Between ABC Goals and Sessions and Those of Early Head Start	Supportive Parent Coaches	Limited Challenges
Theme 3: Integrating ABC and Early Head Start	Smooth Relationship Between Providers	Multiprogram Participation Offers Many Benefits, But Can Be Challenging	Suggestions for ABC Program Content and Delivery Improvement	
Theme 4: Cultural Congruence Between ABC and Family and Community Values	Cultural Differences	Initial Challenges With the ABC Content That Diminished Over Time	ABC as a Good Fit With Latino Communities	

about how we have to be responsive to our children and offer them this, this, this *love*, this attention that children need. (Mother from El Salvador with a 17-month-old)

Four mothers in the study cited learning how to provide nurturance to their children as the most helpful information that they learned related to their relationship with their child during the ABC program.

Connecting their values about parenting and parenting behaviors to their own childhood experiences was another area of great importance to the mothers in the study. The ABC program refers to these childhood experiences as *voices from the past*, and 3 mothers in the study specifically reported learning to identify and address these voices as the most beneficial part of the program in their own lives.

I have learned a lot just like ... you know, [considering] the memories from the past, to try to not commit the same error that [my] parents did. (Mother from El Salvador with a 17-month-old)

One mother shared how her parent coach encouraged her to take a different tactic than had her parents, as she reflected on a voice from the past telling her to pick up her son and spank him when he got angry:

A lot of things happened, honestly, that I learned with [the ABC parent coach]. And especially to not agree with voices from the past . . . We were talking about voices from the past and which voices we hear when the kids are, when they yelled, when they got mad, when they threw tantrums, when they acted out. So the voice, like I told [the parent coach], the voice from the past was when the boy would throw a tantrum and for me . . . it said that I should pick him up, and that I give him a good spanking, . . . and what you did in that moment . . . if I do what they did to me . . . if I pick him up and hit him, it will get worse. So, I try to show him a toy or hug him until he calms down, and the problem has stopped. But if I go and hit him or scold him, the problem will get worse, it's better to stop it there, and so [the parent coach] said that it was very good what I was doing and all. (Mother from Guatemala with a 2-year-old)

Many of the mothers in the study noted the benefits not only of the substantive foci of the ABC program but also of the program's use of video feedback. In particular, mothers commented on how helpful it was to view videos of themselves with their babies to examine their patterns of interaction. Video feedback in ABC is given both instantly (during the same session within which the video is taken) and in later sessions as a way to look back at previous patterns of mother–infant interaction or changes to these patterns over time. Mothers reported this feedback as helping them realize both positive and less positive aspects of their responses to their children. One mother shared:

I paid attention with each recording. [The parent coach] told me "look how you were before and look how you finished in the last session." And it was the change one makes, no?... She made me see one day, watching a video of myself, she explained it to me. And I was like, "Oy, you're right. I hadn't realized that," I said. And she says to me, "Yes, one doesn't realize." She explained it to me and I said "Oh, you're right!" ... "And

you see in your own video, you have done it," she says to me. "You just didn't realize, you didn't know." "Ah, yes" I tell her. Sometimes one doesn't even realize. (Mother from Peru with a 14-month-old)

Differences between ABC goals and sessions and those of EHS. Mothers described stark differences between the ABC and the EHS program goals. Mothers reported EHS visits were focused primarily on the home visitor teaching the children and the mothers taking a more observational role in the home visit. This contrasted with their descriptions of the ABC program, during which mothers shared that the parent coach delivered content to the mothers and supported interactions between the mothers and their babies, with mothers and the mother—infant dyad being the focus of each session. Two mothers explained:

It's a different class that she [i.e., the ABC parent coach] gives because for me, the [home visitor] from [Early] Head Start plays, she played with my daughter, and [the ABC parent coach] didn't because she wanted to see the [baby's] attachment to me. (Mother from El Salvador with an 18-month-old)

In the beginning, I was skeptical about [the ABC program], so that was kind of a challenge and a difficulty for me 'cause I was just like "what if it's just another one of those programs where, like, they try to tell me how I'm supposed to do this with my daughter" and it was the opposite. [laugh] It was the total opposite. It's more, you guys [the ABC program] focus more on the mother and the parent and the child Early Head Start, well . . . they're trying to teach you tools to teach her and your [own tools as a parent are] different. They [the ABC program] weren't trying to, like, to teach you how to teach your daughter, instead [the ABC parent coach was] trying to get us to bond . . . to have that, like, *response*, like you guys would say. (Mother from Chile with a 16-month-old)

Many mothers noted the ABC program's focus on encouraging parents to consider their own experiences growing up and how this affects their parenting approach. For 1 mother who lived with her parents, these conversations involved discussing "all the voices in the house" and how to negotiate these influences as a parent. As 1 mother shared:

[ABC is] a much different program from, from Early Head Start because Early Head Start is involved with, with more activities ... than ABC. ABC brings activities and all, but it is more to teach us parents about what, what it is that our parents did with us for us to see if we agree with them about what they did with us. (Mother from Mexico with two 22-month-olds)

Supportive parent coaches. All 10 mothers in the study positively described their parent coaches: "very nice," "so friendly," and as having "the gift to work with families." Mothers felt well-supported by the parent coaches, saying that the "relationship was lovely." One mother noted how helpful it was to hear from her parent coach what she (the mother) was doing *right*, not only what she needed to change. This type of positive relationship created a solid foundation for mothers and parent coaches to "work well" together and for mothers to "see what she was trying to teach me."

Limited challenges. There were some challenges noted to participation in the ABC program. Several mothers noted feeling rather skeptical at first and being unsure of what they were expected to do during the program—a sense that eased over time, but was initially uncomfortable. Logistical issues such as getting older children to and from school, babies needing to take naps during a scheduled session, illness, and emergencies also were cited as barriers to participation at some points during the program. Two mothers reported initial uncertainty about being recorded on video, but that their concerns about the video camera dissipated as they got used to being on camera and as they saw the utility of the videos to help deliver the program.

Theme 3: Integrating ABC and EHS

Smooth relationships between providers. In the current project, there were several built-in points at which the ABC and EHS providers communicated, including the initial introduction of the ABC parenting program to the family during an EHS home visit, a mid-ABC program check-in by telephone, and a closing report submitted to the EHS home visitor by the ABC parent coach. Additional communication occurred as needed with the family's permission, particularly regarding concerning behaviors or need for additional referrals. Most mothers in the study reported a seemingly good relationship between the ABC and the EHS providers. Some mothers stated that they were not sure or that they knew the two were in communication, but were unsure about their relationship.

Dual-program participation offers many benefits, but can be challenging. Mothers in the study expressed immensely enjoying both programs, stating that they were different, but both had important things to offer them as parents. One mother noted that the ABC and the EHS have different perspectives, but that it is helpful to have both since "children don't come with a guidebook." Two mothers noted that although they liked getting both programs, the differences in approach between EHS (focused on teaching the child a specific lesson) and ABC (focused on the dyadic interaction while delivering content to the mother) caused some difficulty. One mother stated that this was confusing for her and for her child, that her child wanted to explore the materials that the EHS home visitor brought in his own way, and when not allowed to, her son would sometimes refuse to participate in EHS home visits. Another difficulty noted was scheduling and children getting overly tired by multiple visits in a single day, but mothers found that when they held their ABC and EHS visits on separate days, both sessions went more smoothly.

Suggestions for ABC program content and delivery improvement. Mothers in the study shared multiple ideas about how to improve the ABC program. Several mothers suggested having more ABC visits that would cover additional topics, including discipline. One mother thought some of the ABC and EHS visits could be combined. Several mothers thought that the two sessions (ABC and

EHS) should never be offered on the same day. A few mothers stated their desire for the program to be extended to include more families or older children and thought it would be particularly helpful for their community.

Some issues were noted by participants to be more specific to Latino families. One mother stated that it may be difficult for newly immigrated families to invite a stranger into their homes, which could be a barrier to implementing ABC in the Latino community. Needing to discuss the influence of fathers was mentioned several times, particularly in terms of negotiating differences between what the mother is learning in ABC and what the child's father may believe. Other mothers suggested that addressing mothers' basic needs such as housing, food, and immigration issues is an important part of working with the Latino community.

Theme 4: Cultural Congruence Between ABC and Family and Community Values

Cultural differences. All study participants were originally from Latin America. Each said that there were parts of the ABC program that espoused different values than those held by their families and communities of origin. The most commonly cited difference was the theme of following the child's lead, with participants' families being more focused on everyday tasks than attending to what children would like to do. Several mothers noted having grown up in homes that were abusive and/or where they were afraid. The ABC program, in contrast, explicitly encourages refraining from frightening behaviors such as screaming, hitting, or scaring children with threats of being taken by a monster or the police, as had occurred in these mothers' experiences. Other mothers noted their home culture's focus on not giving too much attention to children when they cry for fear that they will be spoiled, and how this did not fit with ABC's assertion of children's need for nurturance when upset. As she discussed differences between ABC's approach and her own experiences growing up, 1 mother commented:

I didn't have a childhood. I didn't know what a doll was. And so I'm saying, I didn't, I never knew what it was to play with my siblings, all of, since, all of us from the age of my older son (six years old), we worked to maintain everyone else, the other little siblings, so for that reason, it's very different. You learn a lot, like I said I learned a lot, and when I had my first son my ideas were different. That my children would not go through what I went through. They will have a childhood. They will have a toy car. And even though my husband scolded me because what I bought was expensive, I don't care. Because children will never go back to being children. They leave that stage, so I tell him "No—my children need to enjoy what I never got to enjoy." (Mother from Guatemala with a 2-year-old)

Initial challenges with the ABC content that diminished over time. There also were several ABC-related lessons that initially seemed difficult, but became easier over time. Mothers noted that following their children's lead was initially challenging, particularly with multiple children present at home, but that this grew easier with practice and time. One mother noted that seeing video feedback

was particularly helpful to improving her ability to follow the lead. Other mothers said that seeing the response from their children was what convinced them of the power of following the lead. One mother recounted her experience during a pudding-making activity as particularly difficult because she was raised not to let children get dirty. However, as the mother watched her daughter enjoy the activity, the mother experienced a shift.

[The parent coach was saying] "Look! Look at how your daughter likes it." So just seeing the pure joy that my daughter was having just being able to do what she wanted and not have mommy control her, I was just like, "Okay, yeah, I'll suck it up just for her." (Mother from Chile with a 16-month-old)

ABC as a good fit with Latino communities. Although the mothers in the study described some differences between ABC and their communities of origin, they all concluded that there were many aspects of the program that were a good fit with the way that they wanted to parent, even if their experiences growing up had been different. As 1 mother said, ultimately, both the community and the ABC program want the same thing: "We need to watch over children so they are ok, healthy, and safe."

Several of the Spanish-speaking mothers noted how important it was that ABC was offered in Spanish. Although occasionally there were regional differences between particular Spanish words in the ABC manual as translated for this study and words that a participant would use, with some discussion, the parent coach and the mother were always able to work out what the other was trying to say. The majority of mothers reported no difficulties with understanding any of the terms introduced in ABC in Spanish. As 2 mothers explained while discussing participating in ABC in Spanish:

It is really, really important.... There are programs, there are supports that one can go to, that help Spanish-speaking families, but in English. And that is where one is, like, put in bars because we can't know what we can do or things we should ask, or how to express our concerns. All of that is a little difficult for Latino families, but if it's already in Spanish, it's much, much better. (Mother from Guatemala with an 18-month-old)

Everything was very easy to understand. I even thought that it had been made especially for us [Latinas]. [laugh] (Mother from El Salvador with a 17-month-old)

Another mother reported that having a Latina, Spanish-speaking parent coach was very helpful, saying that there was never a question about whether she needed to speak in English or if the parent coach understood her—both in terms of language and culture. This mother explained that with other providers of different cultures, she would often wonder if the guidance being given was just because that provider was from a particular part of the world or if it was something that was truly relevant. As this mother shared:

Besides the Spanish speaking was, I guess, the culture, I guess, our cultures. I mean everyone's familiar with the culture now in all parts of the

world, but in culture-wise, umm, a lot of things that she would do and, like, that I would do . . . it felt just natural between us. (Mother from Chile with a 16-month-old)

DISCUSSION

Importantly, this study adds to the ongoing discussion in the fields of infant mental health and attachment-based intervention about if and how evidence-based parenting interventions can be integrated into larger systems as well as delivered in a culturally responsive manner to new immigrant Latino families. We found that delivering the ABC program within EHS home-based services was feasible and helpful from the viewpoint of first-generation Latina participants. Mothers in the study reported enjoying the ABC program, generally finding it a very helpful addition to existing EHS home-based services. Comprehensively serving low-income and low-resource Latino families such as those in the current study requires multiple supports, particularly for concrete needs and immigration services, making ideal the integration of ABC into an existing platform such as EHS. The current study is the first of its kind to focus on (a) feasibility of supplementing home-based EHS with the ABC program and (b) first-generation Latina mothers' experiences of the ABC program when added to home-based EHS services. A number of important issues emerged regarding (a) feasibility and cultural relevance of the ABC program and (b) the sustainability of implementing the ABC program within the context of EHS.

Emerging Issues

Feasibility and cultural relevance of the ABC program. A central issue when considering the feasibility of supplementing EHS with ABC was mothers' experiences of the intervention, particularly considering the needs of the Latino community. Findings from this pilot study suggest that this supplemental model is indeed feasible with Latino families. Evidence supporting feasibility include this study's success with recruitment, engagement, and retention of Latino families enrolled in EHS home-based services. Such success may have reflected the cultural relevance of the ABC program (as noted by our participants) and its delivery in this study. Study participants noted a congruence of ABC with Latino culture in multiple ways. There were several adaptations made, including translation of the manual into Spanish and provision of ABC sessions in Spanish. This project also employed bilingual native Spanish speakers as parent coaches. These "surface-level" adaptations allowed ABC parent coaches to reach a highly vulnerable population and better serve study families. At the same time, deeper adaptations to the ABC program, such as to the logic model or program content, did not appear necessary.

Mothers in the study expressed an appreciation for both a linguistic and cultural match with their bilingual Latina parent coaches. Whereas services in the United States are increasingly being offered in Spanish, as participants shared, it can be frustrating for immigrant families to try to access critical support in

another language as they juggle significant stressors such as finding work, limited social support, adapting to a new culture, and parenting young children. Calzada and Suarez-Balcazar (2014) similarly emphasized the importance of delivery of services in Spanish particularly for these vulnerable families. The parent coach's role in giving mothers support to remain attuned to their children's needs in the moment even as they actively struggle with managing many competing demands seems well-suited to low-income, first-generation Latina mothers, such as those in our study, who may lack input on both positive and challenging aspects of their interactions with their children.

Although the current study was centered on facilitating improvements in mother—child interaction, ABC focuses on reaching families within their natural environments, so that anyone else present in the home was effectively part of the sessions. Other family members were directly invited to join in if they were interested in participating. This inclusive nature of the ABC program is consistent with the notion of "familismo," the value that family is of central importance, which is present in many Latino households. Furthermore, for Latino families who ascribe to traditional gender roles, incorporating fathers is particularly critical to engaging families and facilitating lasting change to parenting behaviors. This is made possible by recognizing, supporting, and celebrating the very important role that fathers play in their children's development.

Participants noted a difference in the messages from their own families than from ABC regarding following the child's lead. At the same time, mothers in the study most often cited learning to follow their child's lead as the most important thing that they learned about parenting during the ABC program. In several studies, Latinas, particularly Latina immigrants, have tended to be more intrusive and directive with their young children than have mothers from other ethnic groups (Ispa et al., 2004). This type of parenting has been linked with childrearing values of children being "bien comportado" (well-behaved) or "bien educado" (well-raised), or more specifically, that children listen well to their parents and are calm and pleasant (Halgunseth, Ispa, & Rudy, 2006). Although Latinas' directive parenting behavior does not necessarily link to negative child outcomes or require amelioration (Harwood, Leyendecker, Carlson, Asencio, & Miller, 1992; Ispa et al., 2004), there is reason to believe that promoting more child-led and synchronous interactions between mother and child may be valuable. Following the child's lead and increased synchrony between mother and child characterized by a smooth "give and take" has been connected to such child outcomes as secure attachment (Isabella & Belsky, 1991), self-control (Feldman, Greenbaum, & Yirmiya, 1999), and physiological regulation (Feldman, Magori-Cohen, Galili, Singer, & Louzoun, 2011; Moore et al., 2009). Such outcomes would, in fact, be consistent with a child being viewed as "bien comportado," even as such traditionally defined "good behavior" derives from new parenting approaches. Coaching mothers on how to follow their children's lead, in conjunction with providing nurturance, facilitates a strong mother-child relationship and can lead to positive child behavior without the need to restrict or punish children using the frightening behaviors that participants described as part of their own upbringing.

Sustainability of the model of EHS plus ABC. Arguably, evidencebased interventions will most easily translate to widespread practice if they can be integrated into existing service systems (Berlin, Zeanah, & Lieberman, 2008). Sustainability, or the extent to which this supplemental model of EHS plus ABC could be maintained, may be affected by several factors. First, when working with diverse families (particularly those who speak English as a second or third language), having fully bilingual (and, if possible, bicultural) parent coaches is critical to facilitate mothers' understanding of the content and comfort with the coach. It may be helpful to emphasize to partnering agencies and to families the inclusive nature of the ABC model, which welcomes other caregivers and children to join the sessions. As ABC is offered to Latino and other families that may have needs beyond the focus of ABC, having a strong referral network will help ensure that concrete needs, immigration-related stressors, and other concerns are addressed.

It also is important to acknowledge that there is a high level of skill required of parent coaches, who are managing delivering session content while attending to and commenting "in the moment" on mother-child interaction. Parent coaches also must manage technology, negotiating camera positioning and downloading and playing back video clips selected specifically to illustrate points of either sensitive parenting or missed opportunities. Mothers in this study cited video feedback as an important part of the ABC program, allowing them to see, literally, what they were doing well or not as well. Supervision of ABC parent coaches also is important and totaled at least 2 hr per week during this study, including ABC-specific supervision for 1 hr per week. Additional protected time is needed for parent coaches to code sections of their sessions to facilitate supervision of the quality of their "in the moment" comments. While this level of supervision may be very helpful to beginning clinicians, it can be challenging to ensure that there is sufficient "in-office" time for coding and for parent coaches to receive both ABC and organization-specific supervision. Nevertheless, providing consistent, reflective supervision to interventionists working with families from low-income, immigrant backgrounds may be an essential part of the integration of parenting programs into EHS (Heller, 2011).

Within an EHS context, it is unlikely that most home visitors could manage all of their existing responsibilities *and* provide ABC to all families on their caseload. Rather, in keeping with this study's expert consultation model, EHS programs might designate one or more specialized staff members, such as the program's mental health consultant or someone who can devote a portion of their time to ABC provision, to become an ABC parent coach, and to offer the program to a subset of families (e.g., with demonstrated early parenting challenges) on an as-needed basis. Within such a model, it would be important for programs to address the challenges for families of (temporarily) having two different home visits each week as well as two different foci of the home visits.

Limitations

This study has several limitations. As in any qualitative study, the focus is not on generalizability but rather on exploring rich and detailed experiences of study participants. Other Latina mothers in EHS could have different experiences than those shared by our participants. Further, the study included only Latinas and thus did not allow for comparisons between Latinas and non-Latinas. Some of the experiences of ABC and of EHS that were not specific to Latino families also could be experienced by families of other ethnicities. Similarly, it is possible that the feasibility and strong acceptance of the combined EHS/ABC model could be replicated with other types of EHS families. Another limitation was not including member checking meetings in the study design; trustworthiness of study findings could have been strengthened by conducting member checking meetings following analysis. Finally, this study was limited geographically to the mid-Atlantic region of the United States and to the Latino families most likely to immigrate to this section of the country.

Conclusion

Enhancing parents' capacity to nurture and respond to infants is an essential component of infant mental health interventions (Jones Harden & Duchene, 2011). The current study, by suggesting that ABC can be implemented feasibly in the context of EHS and can provide added benefits to first-generation Latino families, contributes to the understanding of how infant mental health interventions can be delivered in a culturally responsive manner. Thus, this study represents an important step forward in applying infant mental health principles to interventions with minority families.

When considering long-term, community-based implementation, agencies and providers should carefully evaluate both the resources needed (e.g., personnel, training and supervision, technology, and time) and the fit between ABC and their existing program structure. The next steps for evaluating the use of the ABC program with the Latino community in the context of EHS include (a) evaluating the efficacy of the EHS/ABC model for improving parent–child interaction and physiological regulation and (b) evaluating the sustainability of the EHS/ABC model. Evaluation findings will, in turn, inform multiple efforts to promote supportive parenting within high-stress contexts.

REFERENCES

- Addy, S., Engelhardt, W., & Skinner, C. (2013). Basic facts about low-income children: Children under 3 years, 2011 Fact Sheet. New York: Columbia University, National Center for Children in Poverty.
- Administration for Children and Families. (2002). Making a difference in the lives of children and families: The impacts of Early Head Start programs on infants and toddlers and their families. Washington, DC: U.S. Department of Health and Human Services.
- Administration for Children and Families. (2014). Early Head Start Services Snapshot 2013-2014. Retrieved October 20, 2014, from http://eclkc.ohs.acf.hhs.gov/hslc/data/pir

- Barrera, M., & Castro, F.G. (2006). A heuristic framework for the cultural adaptation of interventions. Clinical Psychology: Science and Practice, 13(4), 311–316.
- Belsky, J., & Fearon, R.P. (2002). Infant–mother attachment security, contextual risk, and early development: A moderational analysis. Development and Psychopathology, 14(02), 293–310.
- Berlin, L.J., Shanahan, M., & Appleyard Carmody, K. (2014). Promoting supportive parenting in new mothers with substance-use problems: A pilot randomized trial of residential treatment plus an attachmentbased parenting program. Infant Mental Health Journal, 35(1), 81–85.
- Berlin, L.J., Whiteside-Mansell, L., Roggman, L.A., Green, B.L., Robinson, J., & Spieker, S. (2011). Testing maternal depression and attachment style as moderators of Early Head Start's effects on parenting. Attachment & Human Development, 13(1), 49–67.
- Berlin, L.J., Zeanah, C.H., & Lieberman, A.F. (2008). Prevention and intervention programs for supporting early attachment security. In J. Cassidy & P.R. Shaver (Eds.), Handbook of attachment (3rd ed., pp. 745–761). New York: Guilford Press.
- Berlin, L.J., Zeanah, C.H., & Lieberman, A.F. (2016). Prevention and intervention programs to support early attachment security: A move to the level of the community. In J. Cassidy & P.R. Shaver (Eds.), Handbook of attachment (3rd ed., pp. 739–758). New York: Guilford Press.
- Bernard, K., Dozier, M., Bick, J., & Gordon, M.K. (in press). Normalizing blunted diurnal cortisol rhythms among children at risk for neglect: The effects of an early intervention. Development and Psychopathology.
- Bernard, K., Dozier, M., Bick, J., Lewis-Morrarty, E., Lindhiem, O., & Carlson, E. (2012). Enhancing attachment organization among maltreated children: Results of a randomized clinical trial. Child Development, 83(2), 623–636. doi:10.1111/j.1467-8624.2011. 01712.x
- Bernard, K., Hostinar, C., & Dozier, M. (2015). Intervention effects on diurnal cortisol rhythms of child protective services-referred infants in early childhood: Preschool follow-up results of a randomized clinical trial. JAMA Pediatrics, 169(2), 112–119. doi:10.1001/jamapediatrics.2014.2369
- Bick, J., & Dozier, M. (2013). The effectiveness of an attachment-based intervention in promoting foster mothers' sensitivity toward foster infants. Infant Mental Health Journal, 34(2), 95–103. doi:10.1002/imhj.21373
- California Evidence-Based Clearinghouse for Child Welfare. (2015). Attachment and biobehavioral catch-up. Retrieved April 6, 2015, from http://www.cebc4cw.org/program/attachment-and-biobehavioral-catch-up
- Calzada, E., & Suarez-Balcazar, Y. (2014). Enhancing cultural competence in social service agencies: A promising approach to serving diverse children and families (OPRE Report No. 2014-31). Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research, and Evaluation. Retrieved from www.acf.hhs.gov/opre
- ChildTrends What Works. (2015). Attachment and biobehavioral catch-up. Retrieved from http://www.childtrends.org/?programs=attachment-and-biobehavioral-catch-up-abc

- Crabtree, B.F., & Miller, W.L. (1999). Doing qualitative research (2nd ed.). Thousand Oaks, CA: Sage.
- Cyr, C., Euser, E.M., Bakermans-Kranenburg, M.J., & van IJzendoorn, M.H. (2010). Attachment security and disorganization in maltreating and high-risk families: A series of meta-analyses. Development and Psychopathology, 22(01), 87–108.
- Dozier, M., Lindheim, O., & Ackerman, J. (2005). Attachment and biobehavioral catch-up. In L. Berlin, Y. Ziv, L. Amaya-Jackson, & M.T. Greenberg (Eds.), Enhancing early attachments (pp. 178–194). New York: Guilford Press.
- Feldman, R., Greenbaum, C.W., & Yirmiya, N. (1999). Mother–infant affect synchrony as an antedecent of the emergence of self-control. Developmental Psychology, 35(5), 223–231.
- Feldman, R., Magori-Cohen, R., Galili, G., Singer, M., & Louzoun, Y. (2011). Mother and infant coordinate heart rhythms through episodes of interaction synchrony. Infant Behavior & Development, 34, 569– 577.
- Halgunseth, L.C., Ispa, J.M., & Rudy, D. (2006). Parental control in Latino families: An integrated review of the literature. Child Development, 77(5), 1282–1297.
- Harwood, R., Leyendecker, B., Carlson, V., Asencio, M., & Miller, A. (1992). Parenting among Latino families in the U.S. In M.H. Bornstein (Ed.), Handbook of parenting, Vol. 4: Social conditions and applied parenting. Hillsdale, NJ: Erlbaum.
- Heller, S. (2011). Reflective supervision. In S. Summers & R. Chazan-Cohen (Eds.), Understanding early childhood mental health: A practical guide for professionals (pp. 199–216). Baltimore: Brookes.
- Isabella, R.A., & Belsky, J. (1991). Interactional synchrony and the origins of infant-mother attachment: A replication study. Child Development, 62(2), 373–384.
- Ispa, J.M., Fine, M.A., Halgunseth, L.C., Harper, S., Robinson, J., Boyce, L. et al. (2004). Maternal intrusiveness, maternal warmth, and mother–toddler relationship outcomes: Variations across low-income ethnic and acculturation groups. Child Development, 75, 1613–1631.
- Jones Harden, B., & Duchene, M. (2011). Promoting infant mental health in early childhood programs: Intervening with the parent—child dyad. In S. Summers & R. Chazan-Cohen (Eds.), Understanding early childhood mental health: A practical guide for professionals (pp. 143–158). Baltimore: Brookes.
- Kaltman, S., Hurtado de Mendoza, A., Gonzales, F.A., Serrano, A., & Guarnaccia, P.J. (2011). Contextualizing the trauma experience of women immigrants from Central America, South America, and Mexico. Journal of Traumatic Stress, 24(6), 635–642.
- Love, J.M., Kisker, E.E., Ross, C., Raikes, H., Constantine, J., Boller, K. et al. (2005). The effectiveness of Early Head Start for 3-year-old children and their parents: Lessons for policy and programs. Developmental Psychology, 41(6), 885.

- Mejia, A., Calam, R., & Sanders, M.R. (2015). A pilot randomized controlled trial of a brief parenting intervention in low-resource settings in Panama. Prevention Science, 16(5), 1–11.
- Mendez, J., Westerberg, D., & Thibeault, A. (2013). The importance of home-school communication as a tool for engaging Latino parents. NHSA Dialog, 16(1), 189–193.
- Moore, G.A., Hill-Soderlund, A.L., Propper, C.B., Calkins, S.D., Mills-Koonce, W.R., & Cox, M.J. (2009). Mother–infant vagal regulation in the face-to-face still-face paradigm is moderated by maternal sensitivity. Child Development, 80(1), 209–223.
- National Research Council and Institute of Medicine. (2000). From neurons to neighborhoods: The science of early childhood development. Committee on integrating the science of early childhood development. In J.P. Shonkoff & D.A. Phillips (Eds.), Board on Children, Youth, and Families, Commission on Behavioral and Social Sciences and Education. Washington, DC: National Academy Press.
- Padgett, D.K. (2008). Qualitative methods in social work research (2nd ed.). Thousand Oaks, CA: Sage.
- Parra Cardona, J.R., Domenech-Rodriguez, M., Forgatch, M., Sullivan, C., Bybee, D., Holtrop, K. et al. (2012). Culturally adapting an evidencebased parenting intervention for Latino immigrants: The need to integrate fidelity and cultural relevance. Family Process, 51(1), 56– 72.
- Perry, D.F., Ettinger, A.K., Mendelson, T., & Le, H.N. (2011). Prenatal depression predicts postpartum maternal attachment in low-income Latina mothers with infants. Infant Behavior & Development, 34(2), 339–350.
- Raikes, H.H., Vogel, C., & Love, J.M. (2013). Family subgroups and impacts at ages 2, 3, and 5: Variability by race/ethnicity and demographic risk. Monographs of the Society for Research in Child Development, 78(1), 64–92. doi:10.1111/j.1540-5834.2012.00703.x
- Shonkoff, J.P., Garner, A.S., Committee on Psychosocial Aspects of Child and Family Health, Committee on Early Childhood, Adoption, and Dependent Care, & Section on Developmental and Behavioral Pediatrics. (2012). The lifelong effects of early childhood adversity and toxic stress. Pediatrics, 129(1). doi:10.1542/peds.2011-2663
- Super, C.M., & Harkness, S. (2002). Culture structures the environment for development. Human Development, 45(4), 270–274.
- Van Horn, P., Osofsky, J.D., Henderson, D., Korfmacher, J., Thomas, K., & Lieberman, A.F. (2012). Replication of child-parent psychotherapy in community settings. ZERO TO THREE, 33, 48–54.
- Vogel, C.A., Boller, K., Xue Y., Blair, R., Aikens, N., Burwick, A. et al. (2011). Learning as we go: A first snapshot of Early Head Start programs, staff, families, and children (OPRE Report No. 2011-7). Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.