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| **Full source reference:**  Clark, G. F., & Kingsley, K. L. (2020). Occupational therapy practice guidelines for early childhood: Birth–5 years. *The American Journal of Occupational Therapy*, *74*(3), 7403397010p1-7403397010p42. |
| **Free access link**:  N/A |
| **Article Overview:**   * This publication is a practice guideline synthesising systematic reviews on cognitive, motor, socio-emotional development and self-care skills interventions for early childhood (birth to 5 years) * 196 articles were included in the review * 4 identified groups of interventions emerged: (1) interventions enhancing cognitive development; (2) interventions supporting mental health; (3) interventions supporting motor development; (4) interventions supporting activities of daily living and sleep. |
| **Key take home messages:**   1. *Interventions enhancing cognitive development:* There is an overall importance of caregiver involvement. There is also:  * **Strong evidence** for   + home-based early intervention programs   + cognitive training programs for pre-schoolers   + parent-implemented interventions (for example including reading aloud to the child)   + parent education (e.g., interaction strategies)   + interventions delivered in preschools (e.g., focusing on literacy and working memory). * **Moderate-strength evidence** for touch interventions * **Low strength evidence** for use of technology.  1. *Interventions supporting mental health and positive behaviour.*  * Outcomes in maternal-infant attachment:   + **Strong evidence** for touch-based interventions (Skin to skin, Kangaroo Care) and parent training programs. * Improving child behaviours:   + **Strong evidence** for manualised massages improving infant self-regulation   + **Moderate-strength evidence** for parent-child interaction therapy for child behaviours (e.g., decrease of challenging behaviours); parent training on child behavioural outcomes and preschool teacher training. * Improving parenting behaviours/mental health (stress, anxiety):   + **Strong evidence of parent training and parent child interaction therapy (PCIT)** 🡪 occupational therapists to address children’s needs but also adopting interventions improving caregivers’ mental health.  1. *Interventions supporting motor development and skills*:  * **Strong evidence** for EI for premature infants * **Moderate-strength evidence** for parental training to implement home-based programmes; combined clinic and home programmes 🡪 **importance of home programmes and coaching parents**.   Interventions for pre-schoolers aged 3-5:   * **Strong evidence** for video games for large motor skills * **Moderate strength** evidence for preschool programs.   Interventions for children with CP aged 0-5:   * **Strong evidence** for constrain-induced movement therapy and bimanual intensive therapy; child and context-focused interventions. * **Moderate strength:** interventions used by occupational therapists such as massage, EI, training parents, using handwriting programs, videogames * **Low strength evidence** for sensory-based interventions.  1. *Interventions supporting activities of daily living, rest and sleep*.   Feeding and eating:   * **Strong evidence** for repeated-exposure interventions * **Moderate strength evidence** for non-nutritive suck and parent training.   Toilet training:   * **Moderate strength evidence** for wetting alarms for toilet trainings 18/30 months old * **Low evidence** for caregiver education.   Sleep outcomes:   * **Moderate strength** evidence for parent training, touch-based interventions and positioning devices.  1. It is important for practitioners to select the appropriate intervention to maximise the number of outcomes targeted in a specific case. |