Purpose: Research suggests that premature infants cared for in private NICU rooms show lower language scores at two years than premature infants cared for in multi-bed rooms (Pineda et al., 2014). With this in mind, Goslings was developed to teach families how to best engage medically fragile infants in the NICU using developmentally appropriate early language and literacy activities. Methods: A 60-minute program provided families with information regarding the importance of stimulating their infants' language development through talking, reading, singing songs and reciting nursery rhymes. The concept of a traffic light was used to communicate the infant's medical readiness for these activities (e.g., red light—talk only, no touch, no toys). Parents also were taught how “to read” their infants' signals to know when they were behaviorally ready for stimulation. Finally, each family received a bag of materials (e.g., books, rattles) to use when engaging in language rich activities with their babies while in the NICU. Participants completed a pre-intervention questionnaire including demographic questions as well as several self-rating scales (e.g., interaction, understanding signals), and a post-intervention questionnaire including questions about program satisfaction, intended frequency of interactions, and understanding signals. Results: Sixty-six family members participated in the evaluation. Almost all respondents reported that they were satisfied with the Goslings program (96%), the skills it taught them (96%), and, more specifically, what it taught them about the importance of talking with (92%), and reading to their infants (95%). Parents reported that they were significantly more likely in the future to read, sing songs, and recite nursery rhymes (p < .001 respectively) with their infants than they had in the past. Ninety-four percent reported that the Goslings program taught them about their infants' signals of readiness for interaction and 96% viewed the program as having increased their confidence in reading their infants' cues. Parents reported that, after participating in the Goslings program, they were significantly better able to read their infants' signals and were more confident about their ability to read these signals (p < .001 respectively). Conclusion: All parents said they would recommend Goslings to other NICU parents and would recommend that the program be continued. Almost all parents thought the program had increased their knowledge of how and when to interact with their infants to stimulate their language development. Almost all parents also thought they would significantly increase their linguistic interactions with their infants after completing the program. However, we were not able to assess whether such interactions between parents and their infants actually increased. We only were able to
assess the parents’ intention to increase linguistic interactions. Future research should consider whether parents’ behaviors actually change after participating in the program and whether Goslings positively impacts long-term language development.

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