Social Validity of the Center for Early Literacy Learning Parent Practice Guides

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ABSTRACT

The social validity of the *Center for Early Literacy Learning* parent practice guides was assessed in a study of 203 parents and practitioners. The participants completed a social validity scale under two conditions: One group first used the practice guides with young children and then completed the scale (users) and the second group completed the scale after reading the guides (non-users). Findings showed that the practice guides were judged as socially valid by both the parents and practitioners, and that the validity ratings were higher among users compared to non-users. Results will be used to make changes and improvements in the practice guides.

Social validity refers to consumers and end-users judgments of the importance and acceptability of intervention practices (Foster & Mash, 1999). The construct was first introduced by Wolf (1978) to explain why interventions found effective in research studies are or are not readily adopted by the intended beneficiaries of the interventions. It is now generally acknowledged that the likelihood of any kind of intervention being adopted and implemented by consumers and end-users is dependent on whether the interventions are seen as socially valid (e.g., Reimers, Wacker, Derby, & Cooper, 1995; Schwartz, 1991).

As part of field-tests of evidence-based early childhood intervention practices, we obtained parents and practitioners judgments of the social validity of different kinds of practice guides (Dunst & Raab, 2007; Trivette & Dunst, 2007) and tool kits of collections of different practice guides (Dunst, Pace, & Hamby, 2007; Trivette, Dunst, Hamby, & Pace, 2007). We also assessed the relationships between social validity judgments and implementation fidelity (Carroll et al., 2007). In all four studies, the practice guides and tool kits received high social validity ratings. More importantly, social validity predicted the use of the practices by end-users in their intended manner. Taken together, the results showed that social validity was an important determinant of high fidelity of implementation.

The primary purpose of the study described in this paper was to ascertain the social validity of the *Center for Early Literacy* (*CELL*) parent practice guides (www.earlyliteracylearning.org.) The secondary purpose was to obtain written feedback and comments about the practice guides from the participants. More than 60 practice guides for infants, toddlers, and preschoolers were the focus of investigation. The practice guides include activities that are used to promote pre, emergent, and early literacy behavior of young children (Dunst, Trivette, Masiello, Roper, & Robyak, 2006). Based on the field-test studies described above, we expected to find parents and practitioners social validity judgments to be high.

The study participants included two different groups: Those who assessed social validity by reading the practice guides and then completing a social validity survey (non-users), and those who used the practice guides with a child or children and then completed a social validity survey (users). We hypothesized that the social validity ratings would be higher in the latter compared to the former group.

METHOD

Participants

The participants were 203 parents and practitioners. They were recruited by posting announcements on both the *CELL* website and in parent and professional website newsletters and by contacting early childhood programs who previously had agreed to be *CELL* field-test sites. The participants included parents of children with or without disabilities birth to 5 years of age. The practitioners were employed in either or both home-based or center-based programs that served children who were birth through age five.

Procedure

A previously developed social validity scale (Dunst et al., 2007) was used to develop the scale for the study. The scale included eight items measuring the *importance* and *acceptability* of both the practices and their intended outcomes (e.g., "This practice easily fits into my daily schedule"; "The practice would be worth the time and effort to use it"). There were both web-based and paper-and-pencil versions of the scale. Each item was rated on a four-point scale asking the respondents to *strongly disagree*, *disagree*, *agree*, or *strongly agree* with each scale item statement.

Parents and practitioners who selected practice guides from the website chose practice guides from any of the three age groups (infant, toddler, preschool). The participants from the field test sites reviewed practice guides that were age-appropriate for the targeted child.

Method of Analysis

Social validity was ascertained by determining for each item the percentage of respondents who *agreed* or *strongly agreed* with each scale statement indicator. Eighty-five percent was the criterion used to establish if an item was judged socially valid.

A series of *t*-tests and Cohen's *d* effect sizes for the two different groups of study participants were used to discern if social validity was judged higher by the participants who used the practice guides with young children (users) compared to those who only read the practice guides (non-users). Preliminary analyses showed that there were no differences in the ratings between the parents and practitioners and therefore the two groups were considered together.

RESULTS

Omnibus Findings

Figure 1 shows the findings for the eight scale items in terms of the percent of participants giving the criterion response. Between 86% and 93% of the participants agreed or strongly agreed with each validity statement. Participants indicated that the practice guides would be/were worth their time and effort to use with young children; the practice guides were easy to read, understand, and use; and that they easily fit into their routines and schedules. The participants also indicated that the format of the practice guides were easy to follow and the practices were clearly explained, and that young children would find the activities interesting and engaging.

Between Group Comparisons

The results for the comparisons between the users and non-users are shown in Table 1. There were significant between group differences on 7 of the 8 items. The effect sizes for the group differences for the same 7 items were between 0.27 and 0.43. In every case, the users gave higher social validity ratings compared to the non-users.

DISCUSSION

Findings showed that the *CELL* parent practice guides were judged socially valid by both parents and practitioners,
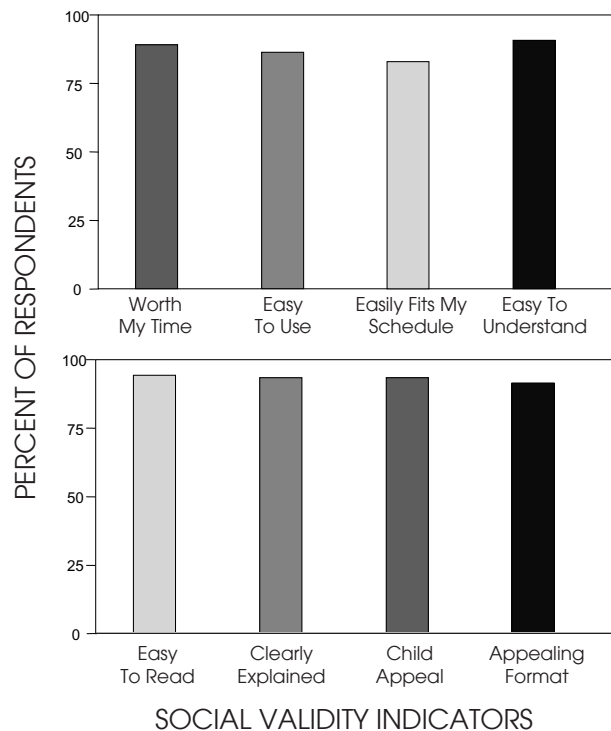

Figure 1. Percentage of study respondents who assessed the CELL parent practice guides as socially valid.

Table 1
Means and Standard Deviations for the Two Contrasting Groups of Study Participants

	Non-Users		Users			
Indicators	Mean	SD	Mean	SD	*t*-Test	Cohen's *d*
Easily Fits My Schedule	3.21	0.74	3.46	0.54	2.24*	0.39
Easy To Use	3.27	0.69	3.51	0.58	2.15*	0.38
Worth My Time/Effort	3.33	0.72	3.55	0.54	1.94*	0.35
Examples Easy To Follow	3.42	0.61	3.49	0.67	0.66	0.11
Easy To Read/Understand	3.36	0.64	3.54	0.54	1.83*	0.30
Practices Clearly Explained	3.40	0.65	3.59	0.57	1.82*	0.31
Would Be Interesting to a Child	3.36	0.62	3.53	0.65	1.66*	0.27
Appealing Format	3.37	0.66	3.62	0.49	2.42**	0.43

* $p < .05$ ** $p < .01$.

and that study participants who used the practice guides with young children prior to completing the survey judged the practice guides as more valid compared to participants who only read the practice guides. The latter is consistent with findings in our previous studies that included social validity measures (e.g., Dunst et al., 2007; Trivette et al., 2007).

In addition to the social validity ratings made by the participants, the parents and practitioners also made written comments about the practice guides. These comments, together with those made by early childhood and literacy experts in another study, are being used to make changes to the practice guides to clarify the instructions, descriptions, and examples to make the practice guides more socially valid and more useful as interventions.

The changes that will be made will focus primarily on clarifying misunderstanding and misinterpretation of the practices constituting the focus of intervention and the descriptions of the practices used to illustrate their implementation. We also plan to examine the social validity data for individual practice guides to identify those that may need substantial rewriting. At the time of preparation of this preliminary report, we had too few individual practice guides with enough social validity data to feel confident about making those changes. We are in the process of collecting additional data to be able to conduct this kind of second-level analysis.

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