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Qualitative evaluation of the implementation of "Tuning in to Kids" in Norwegian kindergartens

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Abstract

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Title: Qualitative evaluation of the implementation of "Tuning in to Kids" in Norwegian kindergartens

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Implementation science has developed to address the research-to-practice gap: Findings from clinical research do not always translate into public health changes. *Tuning in to Kids* is an evidence-based program for parents and caregivers of children that aims to improve children's emotional competence, behaviour, and social functioning. For the implementation of the *Tuning in to Kids for Kindergarten Teachers* intervention in Norwegian kindergartens to be successful, it was important that participants complied to ideas and practices in the intervention. This implementation study aimed to explore participant's *motivation* to use the skills taught in the intervention and whether their motivation changed during implementation. The following research questions were addressed: (1) What motivates kindergarten leaders and teachers to implement the intervention? (2) What are kindergarten leaders' and teachers' thoughts of any connection between their motivation and their application of the emotion coaching skills with children? (3) How does kindergarten leaders' and teachers' motivation change from the start through to the end of intervention period?

The interview subjects were kindergarten leaders and teachers in FUS kindergartens across Norway. Data was obtained from qualitative semi-structured telephone interviews that were conducted before and after the intervention period. A stepwise-deductive inductive strategy was followed in the qualitative analytic process. The interviews were transcribed and coded. Codes from all interviews were grouped based on thematic connection and code groups were further combined into main themes. The result was four main themes: (1) understanding, (2) Aha-experiences, (3) the research-to-practice gap and (4) the main motivation. Based on the results, the conclusion was that kindergarten leaders' and teachers' motivation came from having a good understanding of *Tuning in to Kids for Kindergarten Teachers's* ideas, experiencing moments of Aha regarding the intervention, not being held back by practical issues, as well as working towards their ultimate goal, the wellbeing of the children, by implementing the intervention. These findings have implications for future implementation of *Tuning in to Kids for Kindergarten Teachers* and other mental health

promoting interventions. Furthermore, by exploring *motivation* specifically to gain in-depth information, this study potentially may inform future research about the plausibility of motivation to account for behavior change.

The author of the present thesis planned data collection protocol, recruited and interviewed participants, organized and analyzed the data, and wrote the thesis. This implementation study is part of a project, the evaluation of *Tuning in to Kids* in Norwegian kindergartens, lead by Sophie Seychelle Havighurst, developer of *Tuning in to Kids*. In this regard, Egil Nygaard, Inger Lise Teig, and Sophie Havighurst, with, the candidate (Skåland) as first author, wrote an article entitled the same as this thesis. Skåland wrote the first draft of the article. The article is submitted to an international peer reviewed journal, please see the manuscript draft enclosed.

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Qualitative evaluation of the implementation of "Tuning in to Kids" in Norwegian kindergartens

From January until June 2020, twenty-two FUS kindergartens across Norway implemented *Tuning in to Kids for Kindergarten Teachers* (TIK-KT) as part of a randomized control trial. However, between designing an intervention and use of it in daily practice, a research-to-practice gap may occur: a lack or delay of uptake of interventions with established effectiveness. Implementation research seeks to understand and enhance the translation of research to practice within real world conditions. When implementing interventions, oftentimes there are some degree of behavior changes required from those who put it to use. Motivation is important in driving and giving direction to behaviour. This thesis is about a qualitative study on the implementation of an intervention in kindergartens. In this study, the aim was to explore kindergarten leaders' and teachers' motivation to implementing the TIK-KT intervention.

Children's emotional competence, behavior, and social functioning

Normal development in children is an active and dynamic process, as the child biologically matures and interacts with his or hers environment. The child attains increasingly advanced cognitive, emotional and social skills, and the environments' responses to the child changes accordingly (Moe, Slinning, & Hansen, 2010). As Moe, Slinning and Hansen (2010) emphasize, a "sensitive and responsive care environment, which adapts to the pace of the child's changing psychological need" (translated from Norwegian by author) is the kind of environment that would lay the ground for normal development. As the study presented in this thesis involves an intervention targeting childrens' emotional competence, *emotional* development is of special interest. As children develop, distress and emotional arousal are unavoidable, hence the child needs to learn how to handle such states (Kopp, 1989).

Emotional competence is "the ability to purposefully and fully experience and express a variety of emotions, regulate emotional expressiveness and experience when necessary, and understand the emotions of self and others" (Denham, 2019, p. 493). These skills in how to regulate emotions and to understand their meaning develop through early childhood and adolescence, and they support the resolution of developmental tasks. Furthermore, these skills are important in positive social and behavioral functioning (Havighurst, Harley, & Prior,

2004). Emotional competence is regarded as being among the most important abilities to support the early years in school, in addition to later academic competence (Denham, Bassett, Mincic, et al., 2012; Romano, Babchishin, Pagani, & Kohen, 2010), as well as an important indicator to later wellbeing in adulthood (Havighurst et al., 2004; Shonkoff & Phillips, 2000). The research literature points to how low emotional competence is a precursor to later social, emotional, and behavioral difficulties in children. Oftentimes, children who experience emotional competence difficulties will exhibit behavior problems (e.g. aggression, hyperactivity, social withdrawal, anxiety; Denham, 2019).

Interventions in kindergartens

In neuro psychological research literature, the age zero to five years is regarded a "critical window" for learning and teaching (Housman, 2017, p. 1). The development of emotional competence and self-regulation is included as foundational to academic, personal, and social success in the long run. In addition, in line with the research literature in other domains as well, development of these skills is seen as a result of co-regulation of social and emotional interactions between a caregiver and the child (Denham, 2019; Havighurst et al., 2004; Housman, 2017). Denham, Brown, and Domitrovich (Denham & Brown, 2010) regard it as crucial for young children to utilize their emotional competence to facilitate learning, as much learning happens in social settings with peers and grown-ups. A longitudinal study from 2015 (Jones, Greenberg, & Crowley) presented results on how the understanding of emotions, emotion regulation and other pro-social behavior in kindergarten was associated with success in education, employment, mental health, and avoidance of crime and drug abuse in young adults. This was independent of the child, family, and contextual factors (Denham, 2019).

When children go through the transition from kindergarten to school, their emotional competence is important, as it can facilitate learning and support the child in developing positive and supportive relationships among peers and teachers. Being emotional competent and engaging in pro-social behaviors, children may show more positive attitudes about involvement with school; greater attachment to school; less difficult, risky behavior; and greater academic success (Birch & Ladd, 1997; Denham & Brown, 2010; Elias, Zins, Graczyk, & Weissberg, 2003; Ladd, Birch, & Buhs, 1999; Ladd, Kofender, & Coleman, 1996). However, for children with less emotional competence abilities or the child experiences emotional competence difficulties, there are more negative associations compared to emotional competent children: They get rejected by peers more often, they develop less supporting relationships with teachers, they participate and thrive less, their accomplishments

at school are at a lower level, in addition to them having a greater risk of developing later behavior problems and difficulties at school (Denham, Bassett, Mincic, et al., 2012; Denham, Bassett, Thayer, et al., 2012; Herndon, Bailey, Shewark, Denham, & Bassett, 2012).

In Norway in 2019, nine out of ten children aged one to five years and three out of four one year old children attended kindergarten, which is the highest proportion in Europe (Utdanningsdirektoratet, 2020). The early years in life are characterized by rapid development, developmental leaps and milestones in all developmental areas (brain, language, emotions, cognition). As these years are such important years in many ways, and much of this development being facilitated and shaped by caregivers and important grown-ups, kindergartens seem like a natural place to implement interventions targeted to promote children's health and wellbeing. Kindergarten teachers spend a great amount of time with the children early in the children's lives. Furthermore, during the time in kindergarten, children will be in a variety of situations and experiencing many and strong emotions. For example, to separate from the parent at delivery, negotiations and conflicts with their peers, and expectations and boundaries set by the kindergarten teachers (Havighurst & Harley, 2013). However, the evidence-base for preventive and health promotive programs and interventions in Norwegian kindergartens is inadequate, according to a review from the Norwegian Institute of Public Health (NIPH; Skogen, Smith, Aarø, Siqveland, & Øverland, 2018). Skogen and colleagues found one relevant review in their paper, and concluded with it being uncertain whether preventive and health promotive interventions would be effective in Norwegian kindergartens. In the USA, such interventions have had positive effects, and there is a transference potential to Norwegian conditions.

Even though the evidence-base may be inadequate, many kindergartens utilize interventions and programs that include all children as they strive to "promote positive interactions among the children, promote empathy, and support the children's development of self-regulation" (translated from Norwegian by author; Skogen et al., 2018, p. 51). In addition, interventions and programs being used in Norwegian kindergartens also focus on improving the childcare worker – child relationship, and to strengthen the children's social skills. However, independent of whether it is implemented interventions and programs targeting improving mental health or not, it seems that the *quality* of the kindergartens is of great importance to promotive effects in a variety of studies and social contexts (Skogen et al., 2018; Zachrisson, Lekhal, & Schjølberg, 2010). Skogen and colleagues (2018) summarize that kindergartens have a huge potential as areas for interventions, and that more research is needed on interventions implemented in kindergartens.

Health preventive psychology

In a meta-analysis from 2017, eighty-two school-based, universal social and emotional learning (SEL) interventions involving 97,406 kindergarten to high school students in different countries were reviewed (Taylor, Durlak, Oberle, & Weissberg). The findings were that follow-up outcomes collected six months to eighteen years post intervention, demonstrated SEL's enhancement of positive youth development. Participants did significantly better than controls in social-emotional skills, attitudes, and indicators of well-being, independent of students' race, socioeconomic background, or school location (Taylor et al., 2017). Recently, in a systematic review and meta-analysis by Luo and colleagues, the authors conclude with supporting the use of "comprehensive social-emotional interventions for all children in a preschool classroom to improve their social-emotional competence and reduce challenging behavior" (Luo, Reichow, Snyder, Harrington, & Polignano, 2020, p. 1). They emphasize that this includes *all* children, both those with or at risk of disabilities or delays, and those with normal development. In other words, *universal* social-emotional and behavioral interventions are considered important means for promotive and preventive purposes: promoting social-emotional competence, and preventing social-emotional difficulties or delays and challenging behavior of young children.

Tuning in to Kids for Kindergarten Teachers

Tuning in to Kids (TIK) is an evidence-based program for parents and caregivers of children that aims to improve children's emotional competence, behaviour, and social functioning (Havighurst et al., 2015; Havighurst & Harley, 2013; Havighurst, Wilson, Harley, Prior, & Kehoe, 2010). *Tuning in to Kids for Kindergarten Teachers* (TIK-KT) is a version of the program where the focus is transferred from the parent/caregiver to kindergarten personnel. The program includes professional training in a group setting using role play and tasks to give teachers an understanding of children's emotional competence and what promotes it. Kindergarten leaders and the lead pedagogue attended two-day (14-hour) professional training in TIK-KT to learn about emotion coaching and how to use it with children (December 2019). In the training, teachers learn skills in emotion coaching - a way of interacting by noticing a child's emotion, connecting with the child, naming the emotion, empathising and if necessary, assisting with problem solving or setting limits on behavior (Gottman & DeClaire, 1997). This provided them with skills to support teachers (as resource persons) in their application of emotion coaching in their interactions with children. This training also provided guidance on how to conduct supervision with teachers. The training was provided in English by one of the

program authors, Havighurst. The kindergarten teachers attended a day training (7 hours) on how to use emotion coaching and skills to understand and regulate their emotions (January/February 2020 in Oslo, Bergen, or Trondheim). This training was provided by three Norwegian TIK trainers, all with master's or equivalent degrees in early education/clinical psychology. After the training day for teachers, the leaders or lead pedagogue conducted fortnightly supervision sessions with teachers at their kindergartens to practice emotion coaching and assist them in using the skills with the children in their care (January through May 2020). Kindergarten leaders or the lead pedagogue then received a half-day booster session with the Norwegian TIK trainers to address issues and challenges they encountered in supporting teachers in using emotion coaching skills (March 2020). Structured manuals were provided for all kindergarten leaders/pedagogues/teachers, and support material was also provided in an online format.

The facilitation of the development of children's emotional competence can further impact broader aspects of child functioning (behaviour, social functioning, etc.) (Havighurst et al., 2015; Havighurst & Harley, 2013; Havighurst & Kehoe, 2021; Havighurst, Radovini, Hao, & Kehoe, 2020; Havighurst et al., 2013; Havighurst et al., 2010; Wilson, Havighurst, & Harley, 2012). While the positive effects of using these skills have an evidence base (e.g.: Compas et al., 2017; Havighurst et al., 2010; Izard, Trentacosta, King, & Mostow, 2004; Trentacosta & Shaw, 2009; Wilson et al., 2012), teaching them does not automatically guarantee they will be applied in routine practice, and ultimately, improve the quality of care (Bauer, Damschroder, Hagedorn, Smith, & Kilbourne, 2015; Butler, 2008; Kirchner, Smith, Powell, Waltz, & Proctor, 2020; VanDevanter et al., 2020). If TIK-KT in Norwegian kindergartens are to be successful, then it requires that it is implemented in a way that makes participants use the skills according to the intentions of the intervention over an extended period of time.

The research-to-practice gap

For centuries there has been a problem of non-uptake of effective clinical innovations (Bauer & Kirchner, 2020). The research literature estimates a seventeen-year gap from the time that clinical interventions, assessment, treatment and other clinical innovations get established effectiveness to when it is provided routinely to patients (Balas & Boren, 2000; Bauer et al., 2015; Grant, Cottrell, Cluzeau, & Fawcett, 2000; Morris, Wooding, & Grant, 2011). Furthermore, it is estimated that only half of the evidence-based practices are being implemented into health care (Balas & Boren, 2000; Institute of Medicine Committee on

Quality of Health Care in America, 2001). In other words, findings from clinical research do not automatically translate into public health outcomes, and explanations for this lay not only in the innovations themselves, but just as much include contextual factors and factors related to use or non-use of clinical innovations (Bauer & Kirchner, 2020). Whether interventions and programs are being used or not, also depends on *how* they are being implemented. Barriers to implementation can be found at multiple levels within healthcare delivery: "the individual, the group or team, the overall organization, and the larger system or environment in which individual organizations are embedded" (Ferlie & Shortell, 2001, p. 283). Factors that may impede the implementation process are, for example, the perceived difficulty of implementation (duration, scope, radicalness, disruptiveness, number of steps, among other things) and the degree to which a situation, at the time, is perceived as intolerable or in need of change (Damschroder et al., 2009). Implementation science has developed to address the research-to-practice gap, as it can be defined as "the scientific study of methods to promote the systematic uptake of research findings and other evidence-based practices (EBPs) into routine practice, and, hence, improve the quality and effectiveness of health services" (Eccles & Mittman, 2006, p. 1). Implementation studies typically evaluate the process of implementation and its impact on the EBP of interest. In contrast, clinical trials typically focus on the health effects of EBPs and "does it work?".

Change and motivation

Stages-of-change theories describe the importance of awareness of and motivation to perform a specific behavior (Grol, Bosch, Hulscher, Eccles, & Wensing, 2007). To know what is embodied in "motivation", the well-known Theory of Planned Behavior (TPB) was the theoretical guide in the present thesis. TPB states that behaviour is influenced by the individual's intentions to perform a specific behavior, whereas these intentions are influenced by attitudes (or motivations) toward the behavior, perceived social norms regarding the behavior and perceived control related to the behavior (Ajzen, 1991; Grol et al., 2007). In this thesis, "motivation" is defined as "a process that influences the direction, persistence and vigour of goal-directed behaviour" (Holt et al., 2015, p. 446).

Motivation is among thirty-nine key implementation constructs from published implementation theories (Damschroder et al., 2009). Determinant frameworks are theoretical approaches used in implementation science to understand and/or explain what influences implementation outcomes. The *Consolidated Framework for Implementation Research* (CFIR) is a determinant framework, which specifies types of determinants that acts as barriers

and enablers of implementation outcome. The CFIR describes key constructs from nineteen published implementation theories combined into thirty-nine determinants (implementation constructs), and categorized into five main domains (Damschroder et al., 2009; Nilsen, 2015; Nilsen & Bernhardsson, 2019). One of the constructs in CFIR is called *individual stage of change* and builds on stages-of-change theories. Motivation is one of the constructs included in this domain, in addition to other personal attributes like values, competence, and learning style (Damschroder et al., 2009).

Motivation is also recognized as an important part of implementation in clinical research (e.g. Chiu, 2018; Eccles et al., 2006; Fishman, Beidas, Reisinger, & Mandell, 2018; Grol & Wensing, 2004). A longitudinal study among teachers supporting students with autism aimed to illustrate the advantages of measuring intentions to perform specific practices (Fishman et al., 2018). Their conclusion was that intentions can predict the use of an EBP, and that measuring these intentions is advantageous. Even though the study examined autism specific interventions, the authors' point to the potential for broader applications to school-based interventions. Furthermore, in 2006, Eccles and colleagues did a systematic review on self-reported intentions and the possible predictive relation to clinicians' behaviors (Eccles et al., 2006). They state that, viewed in the context of the larger populations of studies, their findings strengthens "the contention that there is a predictable relationship between the intentions of a health professional and their subsequent behavior" (Eccles et al., 2006, p. 8), where the findings from their review of health care professionals are comparable with those found in the non-health professional literature.

The incentive of doing this study, was to contribute to the filling of knowledge gaps. Literature reviews of research on mental health reveal several knowledge gaps regarding specific issues in specialized domains with one of the gaps being children and youths mental health (Rørstad, Aksnes, Ramberg, & Wiig, 2019). In Rørstad and colleagues' report, the results of a survey of research on mental health in Norway were presented. They appoint that the knowledge base about preventive and promotive public health interventions targeting children's and adolescents' mental health is inadequate, and particularly regarding kindergartens. In addition, they stated a need for more high quality research on planning and implementation of interventions targeting children and youth (Rørstad et al., 2019). Skogen and colleagues (2018) also calls for more research on interventions implemented in kindergartens. Furthermore, Lewis and colleagues (2020) argue that knowledge of implementation mechanisms (processes or events through which an implementation strategy operates to achieve desired implementation outcomes) would help to create more rational and

efficient implementation strategies that fit the specific contextual challenges. However, more mechanistic research is needed in implementation science. As qualitative analytic approaches contribute with diversity in methods of data collection and richness in data, this approach is of great importance in advancing research on implementation mechanisms (Lewis et al., 2020). By exploring the motivation to implement in a specific context, the present study, supported by other research, may contribute with information that can be useful in possible generation of hypotheses and further development in this research area. In addition, the exploration of the construct of motivation may contribute with in-depth information about the plausibility of the construct to account for behavior change, thereby adding specificity.

Aim of the study

This implementation study aimed to explore participants' *motivation* to use the skills taught in the intervention and whether their motivation changed during implementation. Qualitative semi-structured interviews were conducted before and after the intervention period. The following research questions were addressed: (1) What motivates kindergarten leaders and teachers to implement the intervention? (2) What are kindergarten leaders' and teachers' thoughts of any connection between their motivation and their application of the emotion coaching skills with children? (3) How does kindergarten leaders' and teachers' motivation change from the start through to the end of intervention period?

The hope for this study, was that knowledge about kindergarten leaders' and teachers' perspectives on motivation for the implementation of TIK-KT could contribute to optimizing future implementation of the intervention, as well as implementation of other mental health promoting interventions. Another hope for the present thesis' contribution to the field, was that findings from the study may potentially add to the growing knowledge base on implementation mechanisms and to greater specificity when it comes to which implementation strategies, tools, etc., are necessary and which are not when implementing a mental health promoting intervention in kindergartens.

Method

This is a qualitative study with semi-structured interviews of kindergarten leaders and teachers. The reporting standards followed in this paper, is the *Consolidated Criteria for Reporting Qualitative Research*, which is a thirty-two-item checklist to help researchers in explicit and comprehensive reporting of qualitative studies (CORE-Q; Tong, Sainsbury, & Craig, 2007).

Ethics

For this study, approval was obtained from The University of Oslo Human Ethics Committee and the Norwegian Centre for Research Data (Ref #651181). The study was registered with the Clinical Trials Registry (NCT03985124). All the interviewees signed written informed consent and were guaranteed anonymity in the reporting of the results. Information about colleagues, children, or other third parties in kindergartens was handled with care and guaranteed anonymity. Data were stored in Services for Sensitive Data (TSD), a platform and a secure project area for public research institutions.

Research team and reflexivity

The author of this thesis was also the first author of the paper on the same study, namely Vilde Randen Skåland. She is a female graduate student in clinical psychology at the Department of Psychology, University of Oslo (UiO), and was responsible for planning data collection protocol, recruiting and interviewing participants, organizing and analyzing the data, and writing the article and thesis. She had interview experience from earlier classes, but no other experience or training in research settings. The research team, Professor Egil Nygaard at the Department of Psychology, UiO (Ph.D., Dr. Philos; male) and Associate Professor Inger Lise Teig at the Department of Global Public Health and Primary Care, University of Bergen (researcher II, Dr. Polit; female), also functioned as supervisors for the first author. Professor Sophie Havighurst at Mindful: Centre for Training and Research in Developmental Health, Department of Psychiatry, University of Melbourne (BA Hons, Dip Clin Psych, Ph.D.; female) is a program author of the TIK suite of programs and the principal researcher leading the TIK-KT intervention trial in Norwegian FUS kindergartens.

The author of this thesis participated at a two-day training in TIK together with daily leaders and lead pedagogues from the kindergartens, prior to implementation. In general, there was little interaction between the researcher, also being the interviewer (the author of present thesis), and the potential participants, except from certain practical tasks, such as role plays. Hence, they were to some degree familiar with the researcher. At the end of the training, the researcher presented herself as a graduate student in psychology, as well as her study for the thesis. The researchers preexisting assumptions regarding this study, was that the daily leaders and resource persons were likely to – on a general basis – be more motivated to implement the intervention than the kindergarten teachers. This is because kindergarten leaders most likely were more involved in the process in which they decided to implement the TIK intervention, whilst kindergarten teachers would rather be expected to participate once it was already

decided. Furthermore, the researcher was unfamiliar with implementation research beforehand the planning of the study and only slightly familiar with TIK but regards both implementation and TIK positively.

Study design and procedures

The methodological orientation underpinning the present study was content analysis. The TIK-KT intervention is a professional training for teachers, and the procedures of the intervention was described in the introduction.

A semi-structured interview guide was developed by the author for two separate interview sessions. Interviews were to be administered twice: in December 2019 before the one-day training of teachers (T1) and in June 2020 after six months of implementation (T2). The interview guides had thematic and dynamic questions connected to the research questions, and the guides were based on the TPB. Hence, the interview questions were about attitudes towards implementing TIK, subjective norms regarding implementing TIK, and perceived behavior control regarding implementing TIK. As the first time for interviews was before they started implementing TIK, in addition to add variety to the questions, there were also questions regarding the precursors to attitudes, subjective norms and perceived behavioral control. These are some examples of questions in the interview guides (translated from Norwegian by author): "what kind of norms regarding changing a way of practicing your work, do you think exist in your kindergarten?" and "how do you think your colleagues experience having to change their way of working?". These examples show questions about implementation of interventions in general. Typically, follow-up questions would be "why do you think it is so?" and "could you tell me more about it, please?". Furthermore, there were also questions specifically about TIK, for example: "do you have any plans about practicing the TIK intervention?" and "why do you believe employees in your kindergarten are going to do the tasks which the TIK intervention entails?". The interview guide for T1 differed according to the role of the interviewees because kindergarten leaders had already been to the TIK training, while kindergarten teachers had not. In addition, the interview guides had slightly different wording, according to the interviewees' role in the kindergarten, for example instead of "the teachers in your kindergarten" for daily leaders, it would be "your colleagues in the kindergarten" for teachers.

Participants were selected by convenience sampling. The author of present thesis attended the two-day professional training on TIK, provided information about the study to those attending the training, and invited to participation in qualitative interviews about the

participants' motivation for implementing TIK-KT. Six people were sampled, but three were not included due to lack of contact information and late responses. To interview a variety of kindergarten staff and to obtain more respondents, a random selection of intervention kindergartens was called by telephone to invite others to participate. Those who accepted the invitation were given a plain language statement and consent papers via e-mail. Apart from being leaders or teachers in one of the twenty-two FUS kindergartens, the sample of interviewees was varied regarding age, gender, education, and work experience, but information about these demographics was not systematically gathered. In order to protect the interviewees' anonymity, information about their gender was not given explicit, but the gender distribution that follows the anonymized names are representative to that of the sample. Four persons responded and gave their consent. From the seven interview subjects, the result was six interviews preintervention and five interviews postintervention, with three missing interviews due to technical problems with audio recording. Furthermore, out of the seven interviewees in total, three of them were kindergarten teachers, three of them were kindergarten leaders, and one of them were an appointed resource person with the task of supporting teachers. Out of the four interviewees who participated at both interview times, three of them were kindergarten leaders and one of them was a kindergarten teacher. Five out of seven interviewees were employed at different kindergartens.

All interviews were conducted on the telephone by the author and audio recorded with a mobile application. Besides the researcher, no one else was present during the interviews. The interviewees appeared to be mostly undisturbed and alone, but the interview settings in the kindergartens were not in the control of the researcher. The settings for data collection varied. For T1, three interviews were recorded in a private study room at the UiO campus, one was recorded in a nondriving car, and two were recorded in a quiet setting at home. For T2, all interviews were conducted in a quiet setting at home. The interviews included briefing, interview, and debriefing, and they never lasted more than thirty minutes. The briefing included information about the researcher being the only one present, questions would be open and about his/her experience, audio recording of the interviews and secure data storage, as well as an opportunity to ask questions. In the debriefing, interviewees had the opportunity to ask questions, and they were asked about their experience of the interview. The researcher did not answer questions concerning details about the study.

The interviews were transcribed in Norwegian in their entirety by the author. Whenever an interviewee paused, this was marked in written form, and the same was the case regarding vocalized pauses (utterances such as "uh", "like", and "um"; Salazar, 2014) and

unfinished sentences. Throughout the transcription process there was a focus on keeping the dynamics of vocalized pauses and emphasized words clear and in accordance with the interviewees way of saying it, in the written form. In the transcript documents and code book, the interviewees' initials were used, but not the real name of kindergarten employees, kindergartens, places, third parties, or other information which could have been used for identification purposes. Such information would be marked with three dots in square brackets or, if it was not clear what the information left out was about, a fictitious name. These documents were stored in TSD based on the interviewees' role in the kindergarten (teacher, daily leader, or resource person). When the results were to be written and information was used outside of the TSD platform, the interviewees' initials (as well as the real names of kindergarten employees, kindergartens, places, third parties, or other information which could have been used for identification purposes) were not used, and they were given a different name.

Analysis

The study used an in-depth qualitative stepwise-deductive inductive (SDI) model to analyze the data (Tjora, 2017, 2018). This model was a systematic approach with different stages in the research process, working from raw data to concepts or theories. The raw data were generated through telephone interviews. All these interviews were transcribed and analyzed, resulting in major themes. Because the SDI model has a generalizable understanding as its goal (Tjora, 2018, p. 17), these themes were tested as concepts. Between every stage, there was a test to check how the empirical material appeared from a more theoretical perspective. We used three of six such deductive tests, namely, the coding test, the grouping test, and the concept test.

The first stage of the analysis was the coding of the transcribed interviews. All transcribed text was marked in different colors based on subject. When the subject changed, the text was given a different color. This division of subjects by colors was used to make preliminary summaries of each interview. Within SDI, there is a threefold goal with coding. The first goal is extracting the essence of the empirical material. To achieve this, inductive coding should be grounded in the empirical data by using terms that are already present in the empirical data material (see "in vivo" coding in Saldaña, 2016; Tjora, 2018) and/or correspond closely to interviewees' statements to make *empirically close codes (EC codes)*. In addition to interviewees' terms, words and phrases that stand out in the material were also made into codes. This may entail "impacting nouns, action-oriented verbs, evocative

vocabulary, clever or ironic phrases, similes and metaphors” (Saldaña, 2016, p. 107) and these codes are derived from the data (i.e., not from planned topics, theories, etc.). All transcribed text was included in a code. Typically, every sentence or reasoning would become one code. Every code having the same meaning were then put together. This results in sixty-one codes from T1 and eighty-three codes from T2. Subsequently, every code was subjected to the coding test, and either being corrected or removed if not fulfilling the requirements. The coding test questions whether the codes could have been defined before the data generation or if the *only* way to derive them was from the specific empirical material. The intention is to reveal whether the codes represent organized empirical data (and thus could have been defined before the actual coding process), or whether the codes represent "proper EC codes", meaning they are derived directly from the empirical data and detail in a greater extent the actual content entailed in the code. For example, a code that is informative about what an interviewee *talks about* is less informative and empirically close than a code that gives information about what the interviewee *actually says* (Tjora, 2018, pp. 39-40).

The second goal was to reduce the volume of the material by sorting the codes into code groups. The codes were then assembled in a document called a *code book*, sorted after coming from a T1- or T2-interview, and codes that were thematically connected were grouped together. When using the grouping test, a code was either associated with an existing group, or a new group was created. Codes in the same group had internal consistency and were thematically distinct from other groups (Tjora, 2018, p. 48). The code grouping stage began inductively, being based on the EC codes. However, as the code-grouping process proceeded, theory, previous research and discipline-related interests became more relevant: it was possible to recognize already attained knowledge or familiar patterns in the contours of potential concepts (Tjora, 2018). Even so, at this stage, it was still a goal to keep focus on the empirical data.

A third coding goal was to enable the generation of ideas in the conceptualization stage and the analytic process, which were driven less by empirical material and more by theory (Tjora, 2018, p. 50). In the work on the coding, there was a striving to encapsulate the nature of the interviewees’ statements. Since EC codes are developed on the basis of interviewees’ statements, the generation of ideas was also based on details within the empirical data (Tjora, 2018). By having the code groups as the basis and exploring associations between major themes in the material and theories and previous relevant research, the question was raised: "what was this about?". This resulted in the identification of four major themes. The identification of themes was influenced by the conjoining of

empirical data and research literature on motivational psychology, implementation, and learning psychology. Furthermore, to be regarded as a possible theme, more than one respondent had to have mentioned it. In the following is an example of how code groups were conjoined into a common theme, while keeping relevant theoretical knowledge in mind: *meeting points, enough time, concrete tasks, the workplace's present focus*, were all interpreted by the author to be aspects within the research-to-practice gap, as scientific literature on implementation is in line with these constructs (e.g. Damschroder et al., 2009). Another example follows: *reasons to do something, understanding why, already familiar*, were all interpreted by author to be aspects within understanding. As for the resulting major themes in the present study, five out of seven respondents mention them all in at least one of the interviews.

The empirical work was to be combined with relevant theories. We asked ourselves, “What was this about?” When executing a concept test, we considered the extent to which emerging concepts – our findings in connection with relevant research and theory – were sufficiently abstract and thus more generalizable. In this study, we aimed to take our concept development into a form of generalization called *conceptual generalization*, a version of analytic generalization (Tjora, 2018, p. 163). The data were coded by the author.

Results

Eleven interviews were coded in their entirety. Sixty-one codes were identified from T1, and eighty-three codes were identified from T2. These were sorted into twenty-one code groups with four main themes: (1) understanding, (2) aha experiences, (3) the research-to-practice gap and (4) the main motivation. In the following sections, the main themes will be described, and excerpts of interview responses will be provided to illustrate these themes. The interview excerpts were translated from Norwegian by the first author. The *Consolidated criteria for reporting qualitative research* was used as reporting standard, please see Additional file 1 for more details.

Understanding

“Understanding” stood out early in the coding process. It was often mentioned, and every interviewee attributed great importance to it: The importance of understanding *why* one ought to do something; to obtain a good understanding of what was wanted and what the program entailed, as well as; a deep and *mutual* understanding were critical to implementation. For example, one of the leaders described how the rest of the childcare workers responded at the beginning of the implementation:

Anne, T1: For some it's experienced somewhat as an *effort*, and slightly like, "Oh, is there *even more* that is new [...] when we kind of have *passed* that, and it's been introduced... I don't experience that at all then. [...] I experience them as *enthusiastic*, and they are *interested*....

Anne noted that teachers thought that starting a new program might be overwhelming, but as they gradually *understood* more of what the program entailed, it seemed more manageable and even sparked interest and motivation.

The interviewees recognized several aspects of the program and experienced these as helpful. The following excerpt from Anne (T1) is representative of this idea:

Anne, T1: There is nothing that is *controversial* here; these are things that we... agree with, entirely [...] and that might also make it *easier*. To think that *this* is something we can do over time, this is something we agree with.

In one kindergarten, the leader and resource person spoke excitedly about the training days but subsequently found that the rest of the kindergarten teachers were disappointed after the one-day training in TIK-KT. To explain their excitement, they made their own introduction and emphasized, "It was a lot about *why* TIK is important, why it is so important to acknowledge children's emotions" (Marte, T2). In other words, they explained the rationale behind TIK-KT and the implementation, the things they were excited about. Marte described the situation before and after her colleagues received an extra presentation on the TIK-KT

Marte, T2: Then, they said, "Now we understand, now we understand what she said, the other woman" [referring to the one-day training provided by a Norwegian TIK trainer]. [...] Because they had not entirely understood it on the training day, gone through it slightly fast (...) However, after that, it became so much better. We started with supervision quite fast and managed it, and... truly... the progress for the personnel just exploded from there.

intervention:

Marte describes how her colleagues' disappointment changed: when they understood TIK-KT in greater depth, they started utilizing it. The importance of change was highlighted by the informants, as the following dialog reveals:

Anne, T2: You must create a good understanding for the others. Because otherwise it will, uhm, *definitely* not come to a change.

Interviewer: What do you think the employees think of their own *ability* or *control* to... change their

ways of working?

Astrid, T1: No, I think [...] make everybody understand *why* ... then that process will be quite ok!

Additionally, the research behind TIK-KT was emphasized as important by the interviewees, which was a reason for them to use the intervention. Karianne outlines this concept:

Karianne (T1): [...] this is not something that one has just *come up with*, that this is what we are going for, it is because it is professional... It's science.

The interviewees wanted to obtain a sufficiently deep understanding of what the intervention entailed – theoretically and practically – to implement it. The TIK program is evidence-based, and this in itself was an important motivator for why they should put effort into delivery.

Aha experience

Three interviewees spoke of the aha experience as a change of perspective or raising consciousness about something they had been doing. Astrid (T2) described how several of her

Astrid: And some people did have such aha experiences in between that this actually works. (...) And that is... a good starting point.

Interviewer: Yes. Do you think your colleagues seemed motivated?

Astrid: Yes, absolutely!

colleagues' experienced moments of "aha":

In contexts where kindergarten personnel experienced aha moments when practicing TIK-KT, they reported back to Astrid that it was effective. Kristine and Janne also mentioned

Kristine (T2): So, for me it became slightly like an aha experience about... now I kind of work the way I think I *wish* to do it, being so close.

Janne (T1): (...) That is how *you* do it... However, maybe you should not be doing it any longer, so, to get a little of that aha experience that I think is quite important when you've worked in a kindergarten for so many years.

aha experiences:

We can see that the interviewees may have developed a habitual way of working in which they may not reflect on the best way of doing things. When they experience a contrast to what they normally do, a moment of aha, changes to their practices are likely to occur.

Research-to-practice gap

All respondents mentioned a variety of practical challenges they found important when implementing a new program in their kindergarten, including time use, meeting points, the same information for all teachers and the focus of the tasks. These constitute the third main theme from the interviews. Thomas explained why he and his section wanted to continue to use TIK-KT in the future:

Thomas (T2): I think it's a nice tool to have because now everyone's familiar with the tool... And then TIK is concrete to the extent that it's easy to use [...], which makes it easy to connect to situations in daily practice [...].

A practical challenge many mentioned was how to meet with their colleagues at planned meetings, and Astrid (T1) called it “the main *obstacle*” to make things happen in kindergarten. To have such undisturbed meeting points for discussions and talks was

Karianne, (T1): So, I imagine that it, it depends a little on time, truly [...]. That one gets to use *enough time* on this. [...] And kind of that ... it's *much* better that one spends time and *gets the hang of it* than to kind of rush past it and then *kind of* understand it.

important, as Karianne puts it:

The interviewees suggested that learning to do something new takes time and that practicing TIK-KT means that they must slow down and stop when emotion coaching. Without stopping, teachers were less likely to implement the TIK-KT ideas. Anne described

Anne (T1): [...] I can... have a feeling that I have the understanding, but still, I don't see the change in practice. [...] Uhm, practice of change is *difficult* to achieve... And I think it's a great deal about... uhm, having energy excess to follow it up over time.

the research-to-practice gap and reflected on what might be the cause:

Anne (T2): Then, it happens what so often happens in kindergarten, with illness and people whom, uhm, we might have to help out at other sections on a day, and then the focus kind of disappears a little, so then we have more of a “make the day go around” kind of activity.

Other interviewees had a similar experience of this lack of sufficient personnel. They emphasized that kindergartens have a legal requirement for a minimum number of childcare workers to avoid those present being overloaded with tasks and responsibilities.

The main motivation

The fourth main theme was explicitly mentioned by most respondents: The main motivation was acting in the best interest of the children. From the theme “understanding”, it is clear that knowing why one ought to do something and having a mutual understanding among colleagues were important to motivation. In “the main motivation”, the interviewees answered why they did things and where their mutual understanding lay: the best for the children. The following excerpts highlight this:

- Samira, T1: We do, after all, want the best for the children who attend this kindergarten.
- Astrid, T1: When one learns some methods [...] that one think can be *good* for the children, then I think, after all, that those who work here will [...] do the tasks that, uhm... they are obliged to do.
- Astrid, T2: ... the main motivation is that the children shall have it as *good as possible*, that we shall be *the best* grown-ups for children in our kindergarten. [...] that is a good *motivation*...

By using “we”, they point to the sense of common understanding. In sum, as long as they were convinced that the tasks and expectations were for the greater good of the children in their care, the teachers described this as motivating at both T1 and T2.

Discussion

This study aimed to explore the participants’ motivation for the implementation of TIK-KT. With content analysis being the method of choice, the interviews resulted in four main themes: (1) understanding, (2) aha-experiences, (3) the research-to-practice gap and (4) the main motivation. Kindergarten leaders and teachers expressed positive attitudes toward the intervention ideas and motivation to practice emotion coaching skills and toward implementing *Tuning in to Kids for Kindergarten Teachers* both before and after implementation. In the following sections, there will be a clarification of how “motivation” is understood in the present thesis. Thereafter, a discussion on the findings in relation to the research questions follows.

How is “motivation” understood in the present thesis?

In this thesis, “motivation” is defined as “a process that influences the direction, persistence and vigor of goal-directed behavior” (Holt et al., 2015, p. 446). The theory of planned behavior (TPB, Ajzen, 1991) is a well-known and well-studied cognitive theory of behavior change that focuses specifically on “a motivation to change” (Grol et al., 2007), and this theory was the foundation for the questions that were asked in the interviews. According to the TPB, what determines intentions and actions is salient information, or beliefs, relevant

to the behavior. These salient beliefs are the antecedents of attitudes, subjective norms, and perceived behavioral control. The antecedent to attitudes is *behavioral beliefs* that influence attitudes toward the behavior, whereas *normative beliefs* are the antecedent to subjective norms and *control beliefs* are antecedents to perceptions of behavioral control (Ajzen, 1991).

Interpretation of the findings

Based on the interviews, understanding *why* one ought to act in a certain way as well as understanding *what kind of* actions were expected and *whether* there was mutual understanding were critical for implementation. Understanding was important for motivation: if understanding was lacking, kindergarten leaders could be met with resistance. Their motivation may potentially change by increasing their understanding of the intervention; a better understanding reduced resistance and increased motivation by making the intervention more manageable and interesting. The interviewees recognized that change could be difficult to attain. Regarding kindergarten leaders' and teachers' thoughts about a connection between their motivation and their application of emotion coaching skills, the interpretation of the results was that creating a good understanding was crucial. Kindergarten leaders and teachers had beliefs about TIK-KT, for example, that it would be in the best interest of the children. To have beliefs about TIK-KT, they needed to know which practices and ideas the intervention entailed. In other words, because salient beliefs are antecedents to behavior, understanding and knowledge play a role. This was most certainly in accordance with the interview subjects' opinions.

Some interviewees spoke on behalf of their kindergarten when stating their common motivation and ultimate goal: what was best for the children. For those who regarded the intervention as a means to work toward this goal, they found this motivating and important when implementing TIK-KT. Kindergarten leaders and teachers appeared to regard research-based interventions as the preferred way to attain their goal, and TIK-KT's basis in research was in itself an important rationale for why they would put effort into its delivery. Although the interviewees emphasized the scientific value in the context of understanding and knowledge, it was also likely that they saw research-based interventions as the most potent way to maximize children's wellbeing.

All respondents mentioned a variety of practical challenges that impacted the implementation of a new intervention in their kindergarten, i.e., time constraints, meeting places, and sufficient personnel. The variety of practical challenges that the interviewees found important for implementation may apply to several workplaces. Nevertheless, the

challenges mentioned were repeated by several individuals. Hence, the author saw this “package” of challenges as specific to the system they were in: the kindergartens implementing TIK-KT. The conclusion was that their motivation would matter less when it came to their application of the emotion coaching skills with children if they felt hindered by practical issues.

To summarize the discussion thus far, the author believes that when kindergarten leaders and teachers, as well as people in general (since the very basis for intentions and motivations are being discussed), understand and presumably agree with the reasons for an intervention, these individuals are more likely to be motivated to make the effort and take the time to learn and practice new skills and behaviors. When learning, practicing, and understanding, *how* to use the skills, there is the potential for efficient and successful use of the intervention, which in turn can strengthen positive beliefs and boost motivation. However, what if the beliefs about behaviors in the intervention are negative? From the interviews, it became evident that kindergarten leaders and teachers saw that change could be difficult to achieve. If people hold strong beliefs that something will not be useful, this can hinder learning and the application of new skills. For some teachers, this was a theme. The challenge, therefore, was how to address these beliefs so that they would not impede the effective implementation of the emotion coaching skills.

The aha experience and the experience of understanding are not the same. “Understanding” can be defined as “to achieve a grasp of the nature, significance, or explanation of something” (Merriam-Webster). The aha experience is a hallmark of sudden insight. Reber and Skaar (2020) describe this experience as having four defining features: (1) a sudden insight leads to change in (2) processing fluency that increases (3) positive affect and (4) certainty that the insight is true. Experiencing “aha” leaves a person with positive affect and *subjective* certainty (assumed knowledge, but not necessarily fully understood yet) about the newly acquired insight, which seems to facilitate motivation. As Liljedahl (Liljedahl, 2005) writes, beliefs, attitudes and emotions are generally understood as composing the affective domain. Attitudes and beliefs are stable entities, while emotions are relatively unstable. He suggests *changing emotions* as a means to achieve changes in beliefs and attitudes. The role of the affective domain and the differing nature of the aha experience and understanding in general could potentially be key components of motivation and are worth exploring in the context of learning new interventions.

Among the interviewees, one personally experienced an aha moment, another was told about it by a childcare worker during the implementation of TIK-KT, and a third mentioned it

as an important experience to reflect upon one's work practices. They all spoke positively of the aha experience and understood it as important for change (changing the way of doing things, changing perspective or attitudes). Reber and Skaar (2020) concluded in their study on the phenomenology of aha experiences that an increase in metacognitive feelings (processing fluency, positive affect, and certainty) is very important in understanding the role of the aha experience on motivation and coping. In the current study, the results were interpreted as suggesting that people were motivated by a degree of positive affect, such as enthusiasm and excitement, coupled with understanding the ideas.

Findings from the study in relation to prior research

Luo et al. (2020) conducted a systematic review and meta-analysis of classroom-wide social-emotional interventions for preschool children. They found improvements in social and emotional competence as well as decreases in challenging behavior. From this, they drew support for the use of comprehensive social-emotional interventions “for all children in a preschool classroom to improve their social-emotional competence and reduce challenging behavior” (p.1). Findings in this study indicate that kindergarten leaders and teachers are motivated and positive toward TIK-KT, a classroom-wide social-emotional intervention. The Norwegian Institute of Public Health's report on children and youth mental health from 2018 (Skogen et al., pp. 97-98) called for more Norwegian research regarding what types of interventions can be preventive and health-promoting for children in kindergarten. Regarding kindergarten as an arena for intervention, there are very few evaluations of preventive interventions compared to schools. Nevertheless, kindergartens are optimal places for delivering social-emotional interventions that promote development and prevent difficulties while also having positive impacts on the social, emotional, and behavioral outcomes of preschool children (i.e.: Havighurst & Harley, 2013; Lippard, Paro, Rouse, & Crosby, 2018; Luo et al., 2020). However, this requires high-quality kindergartens that have structural quality (i.e., competence, group size), process quality (i.e., listening and attentive interplay between grown-ups and children) and result quality (i.e., the children's well-being and linguistic, cognitive and social development) (Utdanningsdirektoratet, 2017). The present study adds to research on interventions in Norwegian kindergartens.

The literature on implementation science adds to the growing evidence that multifaceted or blended implementation strategies are necessary to enhance the quality and effectiveness of interventions, but the understanding of how and why such strategies work is poor (Lewis et al., 2020). This is unfortunate because it contributes to the assumption that

“more strategies will achieve better results” (p.2) and the use of more resources than necessary. Lewis and colleagues argue that knowledge of implementation mechanisms (processes or events through which an implementation strategy operates to achieve desired implementation outcomes) would help to create more rational and efficient implementation strategies that fit the specific contextual challenges. By exploring the motivation to implement in a specific context, the present study, supported by other research, may contribute with information that can be developed in the possible generation of hypotheses and further development in this research area. In the study, the construct of motivation was explored, to gain in-depth information about the plausibility of the construct to account for behavior change, thereby adding specificity. The knowledge will be generalizable across different interventions, as the focus of the study is on aspects of implementation common for most mental health promoting interventions in kindergartens (e.g.: Bauer et al., 2015; Leeman et al., 2018).

In a survey by Leeman et al. (2018), where they evaluated the factors that influence the use of school health implementation tools, the authors gained insight into how tools were used and why their use was varied. The two frameworks guiding the evaluation were the Interactive Systems Framework (ISF) for Dissemination and Implementation and the Consolidated Framework for Implementation Research (CFIR). Overall, their findings of what tools were valued align with the findings presented in this thesis on important themes regarding motivation for implementation. The school staff’s use of emotion coaching was influenced by contextual factors within three CFIR domains: the inner setting, the outer setting, and the characteristics of individuals. Regarding the characteristics of individuals, they found that knowledge, beliefs, and self-efficacy were themes in addition to school staff motivation. Access to knowledge and information and teachers’ access to professional development related to the tools were among the themes in readiness for implementation (inner setting). About the characteristics of the tools that influenced their use by support systems staff, credibility, compatibility, and complexity were among the factors involved in the tools they used. Likewise, findings from the present study indicate the importance of knowledge, information, and professional development, as described in the theme *understanding*. Additionally, motivation in the form of aha experiences and what was seen to be best for the children aligned with the more general motivation participants frequently mentioned in the evaluation by Leeman and colleagues. The theme presented here, the *research-to-practice gap*, involves kindergarten leaders’ and teachers’ experience of practical

issues, such as what tasks they had to prioritize and a lack of time. Such practical issues were included in the *compatibility* theme in Leeman et al.'s survey.

Methodological discussions

In the very beginning of designing this study, there was a clear aim to have an exploratory approach to kindergarten leaders' and teachers' motivation. The incentive for this was that such a study, potentially, could give rich data on one construct in this specific context, and contribute with knowledge to research on the implementation of mental health promotive interventions in kindergartens, and to the advancement of the research on implementation mechanisms. There has not been developed any implementation strategy for the implementation of TIK-KT in Norwegian kindergartens yet, so the present study contributes at an early stage in the implementation research in this context. Mechanistic research in implementation science is also in an early phase of development, and qualitative studies are an important part in the continuation of this development (Hamilton & Finley, 2019; Lewis et al., 2020).

The SDI model lays the foundation for a systematic approach at different steps, and this makes it practicable and understandable for researchers and students with little experience. By making sure the methods and frameworks were not too complicated, the likeliness of making unfortunate choices and attenuate the study's quality lessened. However, the most important means in order to give an accurate impression of the study's quality, might be transparency. In order to promote explicit and comprehensive reporting of the study, a reporting standard for qualitative research was followed (CORE-Q). Throughout this thesis, there has been examples and excerpts from the data material. Even though this by no means gives a full understanding of the entire data material, it allows the reader to "get closer" to the empirical data (Tjora, 2018, p. 155) and hence, allows the reader to make his or her own interpretations of the empirical data and to evaluate the quality of the researchers' work.

The data for present study was gathered by the author. One of the study's strengths is that internal consistency was high regarding transcribing and coding of the interviews. Conversely, this could be a weakness in that interpretations and perspectives were limited to those of one person. The author attended the training on TIK-KT and hence, she was attached to the ideas, and therefore it was a possibility that she may have been biased in her views of what the interviewees reported. In addition, the interview guides were developed by an inexperienced student and were not pilot tested. The implications of this, is that the interview guides potency to measure kindergarten leaders' and teachers' motivation, is unknown. To

reduce these weaknesses, the research team provided feedback and contributed with discussions on the content and process, as well as the aim has been to keep the empirical data material present and active throughout the process. The author of the present thesis was supervised by Inger Lise Teig regarding coding to reduce bias. Another strength of this paper was the opportunity to explore kindergarten leaders' and teachers' experiences in depth, because the qualitative approach resulted in rich data. Furthermore, this approach made it possible to grasp how the interviewees' descriptions changed both during a single interview and between interviews at two different times. However, material to reflect on and understand was limited to what the interviewees themselves discussed with respect to their practices. It was not within the scope of this study to directly measure what they did, so there may be a mismatch. As mentioned, it was an aim to make this thesis transparent in the sense of being explicit regarding the authors' interpretations.

Research is not done in a "social vacuum" (Tjora, 2018, p. 156). In this case, the social surroundings of the study were the University of Oslo, other psychology students and experienced researchers in the research team. However, the author of this thesis began the scientific work on the thesis half a year prior to fellow students, hence there was not a great extent of peer-influence *directly*. Furthermore, after six months of working on the present thesis, the society was shut down due to the COVID-19 pandemic. In summary, this study is a result of independent work by the author, combined with close supervision and support from supervisors/research team. As the manuscript on the study were to be submitted to a journal for publishing, it was essential that choices made and steps taken throughout the process were understood and agreed upon by the whole team of co-authors, with this being a strength regarding the validity of present thesis.

Ethics

Even though general and specific precautions were taken regarding participants' anonymity and sensitive data, there are potential ethical issues which may have influenced the results in this study. In order to participate as interview subjects, kindergarten leaders and teachers had to read the plain language statement and sign the consent papers. However, is it certain that the consents were signed entirely voluntarily? At the two-day training on TIK-KT, Havighurst was present and giving the author the opportunity to present the study. It is possible that some of the attendants felt pressure to participate, due to the authors connection to Havighurst, who is a program author of the TIK suite of programs. Furthermore, kindergarten leaders would be able to know if teachers in their kindergarten were going to

participate/had participated in interviews. This is because, in some cases, lead pedagogues accompanied the kindergartens' daily leader to the two-day training if he or she was appointed resource person. In addition, as the author of present thesis contacted daily leaders in the FUS kindergartens to recruit more participants, several daily leaders would be the ones asking teachers in their kindergarten about participation. When a person regarded as an authority, this being Havighurst as an expert or daily leaders in the kindergarten, is involved in the signing of consent papers, there is reasons to believe there might have been a degree of pressure and to question voluntariness.

When it comes to the reporting of data which is qualitative in nature, and particularly citations from interviews, there is a small possibility that it can be recognized because the researcher does not have a rich understanding of the individual who is participating, nor about the individuals' relations to other people in the setting of interest. In addition, it is important to take caution about reporting too much of the dataset in its context and entirety, as this will make it more easy to recognize individuals. Despite information about sensitivity and anonymization in the consent documents, it is possible that some of the interviewees felt uncertain or insecure about the presentation of their responses, for example, concerns about whether their answers could be recognized. If interviewees were worried about certain people being able to recognize their answers, it might have influenced them in a way that makes them talk more favourably about, for example, the kindergarten, leadership, or implementation process. Kindergartens may also be in a competing position with other kindergartens, and hence the employees may try to promote their own kindergarten in the way they answer in the interviews. If interviewees gave their answers during the interview based on something other than his or her genuine experience, this would impact the validity of the results, making them invalid.

In order to ensure interviewees' anonymity, their names were changed and information regarding what kindergarten they worked in was not given in the thesis and article, during interviews, or any other circumstances. Information about third parties, for example names of children or colleagues in their kindergarten, were not given in the thesis and article, during interviews, or any other circumstances. The anonymization was to ensure that only the individual who uttered the words and sentences would be able to recognize what was said by himself/herself, but not anyone else.

Implications for the research field

There is a need for developing knowledge of implementation mechanisms, and to gain knowledge about mental health promotive interventions in Norwegian kindergartens (Hamilton & Finley, 2019; Lewis et al., 2020; Rørstad et al., 2019; Skogen et al., 2018). Specifically of what influences kindergarten leaders' and teachers' motivation for change. This thesis presents the findings that kindergarten leaders' and teachers' motivation for implementing an emotion socialization intervention, *Tuning in to Kids for Kindergarten Teachers*, is influenced by understanding the interventions' ideas and rational, experiencing moments of "aha" regarding the intervention, practical issues, and by working toward a goal: the wellbeing of the children. These findings contribute to an understanding of what and how motivational factors influence the fidelity within an environment with multiple practical limitations. The knowledge is generalizable across different interventions, as the focus of the study is on aspects of implementation common for most mental health promoting interventions in kindergartens. This thesis presented results from an exploratory study. However, researchers have been urged to take on *directed* qualitative research by developing hypotheses and generating interview guides in order to directly test mechanisms (Lewis et al., 2020; Moore et al., 2015). Future research may investigate potential causal pathways between motivational factors and implementation fidelity to enhance understanding of implementation mechanisms, and eventually, to generate new theories. In addition, the findings of what influenced kindergarten leaders' and teachers' motivation in this study, may be used in a development of an implementation strategy for the implementation of TIK-KT intervention, which might increase the effectiveness of the intervention.

Implications for clinical practice

By facilitating better implementation of mental health promoting interventions, it is possible to contribute to the improvement of the quality and effectiveness of health services. This thesis presents several motivational factors influencing kindergarten leaders' and teachers' motivation for implementing an emotion socialization intervention, *Tuning in to Kids for Kindergarten Teachers*. It is critical for motivation that kindergarten leaders and teachers have a deep and mutual understanding of the interventions' ideas and rational, and this have implications for the presentation of the intervention, as well as how to address this need during the implementation process. If kindergarten leaders and teachers experience moments of aha regarding the intervention, this may increase their motivation. However, is it possible to facilitate moments of aha – and is it possible in the specific context of

kindergartens implementing interventions? The answer to this is most likely that "this would be very complex», and it is also far beyond the prerequisites of this thesis' discussions. As a curiosity, Liljedahl writes that: "the environment for such an [aha] experience can be orchestrated, but the experience itself cannot" (Liljedahl, 2005, p. 232). Practical issues may negatively impact the implementation of new interventions in kindergartens. This knowledge may be useful in raising awareness about the importance of such challenges, and by giving examples of what the practical challenges might be in kindergartens. If there is an open dialogue within organizations' structure of employees, this might be one way to discover and solve practical challenges. It is important to kindergarten leaders and teachers to have a goal, or a "main motivation" in their everyday work. It was beyond the scope of this study to explore variations in intrinsic or extrinsic motivation, or whether it is important that there is a perceived *mutual* motivation, but this motivational factor needs to be considered implementing an intervention in kindergartens.

Conclusion

This implementation study aimed to explore participants' *motivation* to use the skills taught in the TIK-KT intervention and whether their motivation changed during implementation. Kindergarten leaders and teachers expressed positive attitudes toward the intervention ideas and motivation to practice emotion coaching skills and to implement TIK-KT at both T1 and T2. Their motivation came from having a good understanding of the ideas of TIK-KT, experiencing aha moments regarding the intervention, not being held back by practical issues, and working toward their common goal. This is generalizable across different interventions, as the focus of the study is on aspects of implementation common for most mental health promoting interventions in kindergartens. The findings in the present study add to the knowledge base about facilitators and barriers to implementation of this type of interventions. Furthermore, this knowledge acts to enhance insight into participants' experience of implementation, as well as valuable insights for possible development of implementation strategies for the TIK-KT intervention. Future research may investigate potential causal pathways between motivational factors and implementation fidelity to enhance understanding of implementation mechanisms and consider the possible advantages in developing an implementation strategy for the implementation of TIK-KT intervention.

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