They also showed a more positive attitude towards sensitive parenting and sensitive discipline. In families with high levels of daily stress or marital problems, a reduction of overactive behavior in the children was found. In the intervention group, children carrying a gene that has been linked to the development of ADHD (among other things) showed a strong reduction in externalizing behavior.

Recent research has shown that VIPP-SD significantly improves the quality of home-based child care. Currently VIPP-SD is being tested in child care, in families with a Turkish background, in families with children exhibiting autistic behavior, and in foster families.

VIPP-SD has been recognized as a proven and effective intervention by the Dutch Youth Institute, and is registered in the Effective Youth Interventions database.

Publications on VIPP & VIPP-SD


More information

For more information about VIPP-SD and training opportunities, please contact:

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Aim and target group

The Video-feedback Intervention to promote Positive Parenting and Sensitive Discipline (VIPP-SD) is a preventive intervention aimed at increasing sensitivity and improving discipline strategies of caregivers in order to encourage positive interaction between caregiver and child, and to prevent or reduce behavioral problems in children aged 1 to 5 years. To reach this goal the intervenor works on:

1. increasing the observational skills of caregivers
2. increasing caregivers’ knowledge about the upbringing and development of young children
3. increasing the capacity of caregivers to empathize with their children
4. making parenting behavior more effective by using sensitive responsiveness and sensitive discipline.

The target group consists of families with one or more children aged 1 to 5 years who are at (an increased) risk of behavioral problems like aggression, oppositional behavior and overactive behavior. There is also a VIPP-SD version for professional caregivers who work with children.

Background

Research shows that there are two aspects of parenting that play an important role in the development and continuation of behavioral problems in children: sensitivity and discipline. Sensitivity in parenting means noticing the child’s signals, interpreting these signals correctly and responding to them promptly and appropriately. Discipline means setting boundaries and regulating unruly or disobedient behavior of the child. The combination of these two aspects is the basis of VIPP-SD, in which sensitivity in the broad sense, as well as sensitive discipline are the central themes. Basic assumptions of the intervention are creating a positive atmosphere, recognizing the caregiver as the expert of the child, and emphasizing and reinforcing positive interactions between caregiver and child.

Structure and content

The VIPP-SD program is carried out at the family’s home or at child care, and consists of six visits (sessions) of approximately 90 minutes each. Each visit starts with a recording session, after which the recordings of the previous visit are viewed and discussed.

The intervention is divided into three phases, each containing two sessions. Phase 1 (visits 1 and 2) focuses on the child’s perspective. In addition to getting to know the caregiver, and building a positive relationship with them, exercises will be done together with the caregiver in observing the behavior of the child, and empathizing with the child. Strategies will be discussed that can help to offer the child an alternative for disobedient behavior, and caregivers are encouraged to praise their children and give them compliments when they behave in a positive way. These first two visits are all about the behavior of the child. When viewing the previous week’s recordings, positive interaction between caregiver and child is encouraged and reinforced.

In Phase 2 (visits 3 and 4) the behavior of the caregiver when dealing with the child is actively addressed. The caregiver is shown how and when positive behavior in parenting is effective, and the intervenor will discuss how this positive behavior can also be used in different situations. The caregiver will be given tips on how to deal with a temper tantrum of the child.

Phase 3 consists of two booster sessions (visits 5 and 6) in which all themes are addressed once more. The first four home visits have their own themes with regard to sensitivity and discipline. Each theme of the previous session is integrated into the following visit. The following table shows the most important themes per session.

<table>
<thead>
<tr>
<th>Themes VIPP-SD per home visit:</th>
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<tbody>
<tr>
<td>Session</td>
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During the second visit the technique “speaking for the child” is introduced. The intervenor provides “subtitles” for the behavior of the child in the recordings, and invites the caregiver to do the same. This technique is also used during subsequent visits to stimulate the caregiver to look at the child’s behavior in a different way, and to understand it better.

Effectiveness

The effectiveness of VIPP (the base-intervention of VIPP-SD) has been demonstrated in different countries and for different target groups in scientific research with subjects randomly assigned to intervention or control groups and including pre- and post-tests. VIPP has been shown to increase sensitivity in mothers with an insecure attachment representation, and in adoptive mothers. In families where mothers suffer from an eating disorder, VIPP reduces conflicts at mealtimes.

The effectiveness of VIPP-SD (VIPP with emphasis on sensitive discipline) has been demonstrated in a study with randomized assignment to an intervention or control group and with pre- and post-tests. Mothers of 1 to 3-year old children in this study showed more positive discipline strategies after the intervention than the mothers in the control group did.