

RECENZJE I SPRAWOZDANIA [Reviews and reports]

**Femmie Juffer, Marian J. Bakermans-Kranenburg,
Marinus H. van IJzendoorn (red.) (2008).**

Promoting Positive Parenting. An attachment based intervention.
New York: Lawrence Erlbaum Associates/Taylor & Francis Group (ss. 256)

The book *Promoting Positive Parenting. An attachment based intervention*, edited by Femmie Juffer, Marian J. Bakermans-Kranenburg and Marinus H. van IJzendoorn published in 2008 provides an opportunity to become familiar with the *Video-feedback Intervention to Promote Positive Parenting* (VIPP) program. The VIPP program is addressed to caregivers, mostly mothers and their children in the age between 1 and 5. The program aims at enhancing parental sensitivity making parents more responsive and sensitive to needs and bids sent by their child in everyday situations. The program is structured by home visits during which video-recordings of caregiver-child interactions and intervention-session were carried out. The program has been evidenced in numerous studies to impact the increase of maternal sensitivity and indirectly affect attachment security of children.

The book outlines the framework of attachment-based interventions providing a detailed description of research on the VIPP program which currently is one of the most important among such programs. Until now the VIPP program has been implemented in several countries and carried out in the various groups of children and caregivers – including nurseries and kindergartens, children with somatic

problems, or mothers suffering eating disorders. The book consists of chapters which may be interesting for both practitioners and theorists.

The VIPP program is carried out through home based sessions during which parent - child interactions are recorded in everyday situations. The main goal of intervention is to increase parental sensitivity to child signals, e.g. cooing or teasing. The research indicates that maternal sensitive responsiveness and attunement to child's signals are associated with attachment secure base behavior of the child.

The program development began 20 years ago at Leiden University in the Netherlands. The standard VIPP program and its two other variants are described in detail in the second chapter of the book. The first VIPP extension addresses additional representational discussions (VIPP-R) and investigates attachment representation of the mother. The second VIPP extension is focused more on mother-child current relation and addresses additionally maternal capacities of handling child discipline in a sensitive way (VIPP-SD). All interventions are standardized, but also individualized which means that an intervener is guided by theoretical background and standardized methods or procedures, while considering

the observed particular parent-child relation.

Recordings of the caregiver-child interactions are the starting point for each intervention sessions. Interventions are carried out at child's home, typically including from four to eight visits. Daily activities between the caregiver and the child, such as playing together, feeding or bathing the baby are video-recorded. The intervenier providing the intervention does not take part in caregiver-child interaction. Recorded materials from one home visit are commented by the intervener during the next home visit. Comments have a primarily positive character, which aims to strengthen the sense of competence in the caregiver. The third chapter of the book provides a case study unfolding the organization of the VIPP intervention along with evidences on the impact of the VIPP on maternal sensitivity.

The following chapters – the fourth and the fifth characterize various early intervention programs aiming at promoting positive parent-child interactions in terms of their effectiveness. These meta-analyses evidences that short-term intervention, based on several meetings and focused on enhancing the sensitivity of a parent is the most effective.

Chapter sixth of the book analyses the VIPP intervention as a chance for helping insecure mothers with temperamentally reactive infants to increase their sensitivity and add to attachment security of their children. The VIPP intervention in this group of mothers and children supports differential susceptibility hypothesis assuming that some, usually emotionally difficult children are more sensitive to parental (both good and bad) influences. In this chapter the VIPP potential is discussed in this context.

Chapter seven presents evidences of effectiveness of the VIPP program in supporting families with preterm born children and children suffering from dermatitis. Although the VIPP intervention is based on attachment theory and is structured, the program is not carried out in line with a rigid schedule. The program realisation is rather adjusted to the needs of the particular caregiver-child dyad, thus open to modifications.

It is often the case that aside the VIPP program carried out in a family a psychotherapy is conducted in parallel. The combination of both interventions is described in chapter eight giving the example of mothers suffering eating disorders. These mothers often benefit from cognitive-behavioral therapy and additionally take part in the VIPP program addressing mother-child relationship. Evidences are discussed in this chapter indicating that such combined intervention is a very effective solution.

Beneficial outcomes of the VIPP intervention in an adoptive families are described in chapter nine. Participation in such intervention is very important and beneficial for adoptive parents as their adopted children in their biological families often experienced care deprivation and other adverse childhood experiences. Social and attachment signals sent by these children can be confusing, hard to interpret, distorted, thus parents will not always be able to respond to them in a sensitive and appropriate way without an appropriate training provided within the VIPP program. It should be also noted, that intervention in this group must be repeated in the course of a child's development by a strengthening session in order to maintain and strengthen the effects triggered by the intervention. It is worth noting that each adoptive fam-

ily in the Netherlands that shows the need for intervention can participate in the VIPP program (approximately 4 meetings) and it is largely reimbursed by the government.

Chapter ten discusses the VIPP intervention conducted among caregivers in nurseries and kindergartens. It addresses the sensitivity of professional caregivers working in nurseries or kindergartens to signals of each child under their custody. The chapter provides evidences indicating that sensitive professional care enhanced by the VIPP program is associated with better functioning of children.

The VIPP intervention extended by sensitive discipline module (VIPP-SD) carried out in the group of children who were threatened by the early onset of antisocial disorders is analysed in chapter eleven. The previous research indicate that negative early parent-child relationships can predict child's externalizing problems, thus early sensitivity-focused intervention may be beneficial. The results of the VIPP-SD program implementation revealed that the intervention program

occurred to be preventive also in this group of families. These results contribute to the research on anti-social behaviours in late childhood and early adulthood.

The last chapter of the book summarizes the *Video-feedback Intervention to Promote Positive Parenting* program, its implementation and effectiveness in different groups of children and caregivers. The reader of the book has the opportunity to expand his or her knowledge on basic assumptions, implementation, and effectiveness of intervention of the VIPP program in particular and video-feedback intervention programs in general. Case studies and research results driven from different families benefiting from the program and described in the book allow to make the scientific information more vivid. To sum it up this is an important book for both theorists and practitioners who wish to broaden their knowledge of family relations, psychological development and clinical psychology.

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