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## Early psycho-social intervention program WHO/ICDP as an effective optimization method for child-parental relationships

*Oksana M. Isaeva<sup>a</sup>, \* Elena N. Volkova<sup>b</sup>*

<sup>a</sup> National Research University "Higher School of Economics" 136 Rodionova street, 603000, Nizhniy Novgorod, Russia

<sup>b</sup> Saint Petersburg University, Universitetskaya naberezhnaya, 7-9, 199034, Saint Petersburg, Russia

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### Abstract

This article investigates the problem of optimizing child-parental relationships with "Early psycho-social intervention program WHO/ICDP" in the Russian environment. We conducted a study of 75 parents who have normally developing children from ages 0-7 (a total of 75 children) and took part in the ICDP program. Before participating in the ICDP program, the parents' self-attitudes stay positive, but yet show some inner contradictions. The most controversial domain is power and influence, dominance and suppression as opposed to understanding and accepting a child. The results show to us that the ICDP program has corrected the parents' attitudes: it strengthens an educator's positive role for a parent, develops the positive image of a child, and improves positive parenting skills (understanding and accepting a child's wishes, interests and abilities; emotional self-control; positive regulation of a child's behavior). The program allows parents to find inner resources for optimization of child-parental relationships.

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\* Isaeva O.M. Tel.: +7-906-579-30-44.

E-mail address: oisaeva@hse.ru, mom\_nn@mail.ru

## 1. Introduction

Optimization of child-parental relationships becomes a widely discussed topic for both researchers and practitioners as the character of interaction between parents and a child determines the child's psychological, social and neuro-physiological development. A variety of studies revealed that the characteristics of child-parental relationships serve as a factor for development of a child's intellectual, personal and creative capacity, and optimization of child-parental interactions improves adult's understanding of child's behavior and motivations [1], [2]. Programs for optimization of child-parental relationships usually employ an instructive or facilitative approach [1], [2], [3].

In the instructive approach parents are presented with prepared examples of interaction and behavior, which they can use in everyday communication with their children. The facilitative approach suggests creation of favorable conditions which will stimulate each parent to develop her own educational solutions in the most positive manner for a particular child. The facilitative approach helps children in their development by easing "difficulties of growing up" [1].

"The International child development program" (ICDP) exercises a facilitative approach which allows parent to see a child's positive sides and abilities and provides a deeper understanding of their parental skills. Facilitation is the main method of motivation for positive change in interaction with children. The leading ICDP principle is that the best way to help children is by helping parents to improving their competence in child's development and education. The program emphasizes critical points in interaction between adult and child, such as the adult's attention and ability to identify emotional signals from the child; praising the child; reflection and widening of the child's opportunities on the basis of the experience gained; support for the child's ability to regulate, plan and control its behavior, which finds a reflection in the program's emotional, facilitative, and regulative dialogs.

In 1992 the ICDP was positively assessed and later adapted by the World Health Organization under the name of "Early psycho-social intervention program WHO/ICDP". The effects of the program were appraised in Norway, Denmark, Sweden, Columbia, Brazil, Paraguay, Macedonia, Angola and Mozambican, where it demonstrated a potential to optimize child-parental relationships [4], [5], [6].

The appraisals were based upon positive changes in parents' attitudes to themselves as nurses and educators, the child's image, child-parent interaction styles, and children's psychological well-being before and after participation in the training.

The program is new to Russia; we could not find any studies of the program's impact on the optimization of child-parental relationships in the Russian Federation.

*The goal* is to single out the main directions for optimizing child-parental relationships with ICDP in the Russian environment.

## 2. Methods and tools

ICDP was implemented in the Nizhny Novgorod region (Russia) in 2015-2016. ICDP trainers educated 7 groups of parents. It took 24 academic hours to train each group. The training took place once a week, and contained 4 group and 2 individual sessions lasting 4 hours each.

The participants were 75 parents (73 women and 2 men aged 21-38 years; 86.66% have a university degree; 13.37% have secondary professional education; 80% are married, 20% (women) are single); all the participants have normally developing children aged 0-7 ( a total of 75 children, including 24 children aged 1-3 years, 51 children aged 3-7 years).

On the baseline all the participant were tested by using the following tools: Parental perceptions of themselves as a nurse (N. Armstrong and others), Parental perceptions of the child (N. Armstrong, etc.), Self-descriptions of parents as a nurse, Strengths and difficulties questionnaire (SDQ, R.Goodman) [7], Parental attitude research instrument (PARI, E.S. Shefer, R.C. Bell).

The data analysis of descriptive statistics was performed by using the SPSS 21.0 software.

### 3. Results and discussion

Prior to participating in the ICDP program, parents had following distribution of their own characteristics and those involving their interaction with children.

Table 1. Baseline parental attitudes (PARI)

Scale No.	Scale name	Mean value	Standard deviation
Attitudes to role in family			
3	Dependence on the family	12.20	2.85
5	Self-sacrifice feeling	12.00	3.38
7	Family conflicts	12.53	3.27
11	Parent's excessive authority	14.26	2.08
13	Dissatisfaction with the lady of the house role	11.53	3.52
17	Spouse indifference	11.40	1.35
19	Mother dominance	10.80	3.02
23	Mother dependency	15.53	2.41
Attitudes to children			
Optimal emotional contact			
1	Verbalization	16.33	1.91
14	Partnership	12.40	2.32
15	Development of child's activity	13.66	2.38
21	Equal relationships	14.20	2.75
Excessive emotional distance from child			
8	Impatience	11.53	3.15
9	Rigor	10.93	3.23
16	Avoidance of contact	9.66	1.71
Excessive concentration on child			
2	Excessive care	11.06	2.08
4	Suppression of will	13.33	1.49
6	Fear to offend	13.40	1.72
10	Exclusion of inter-family influences	12.53	2.53
12	Suppression of aggression	11.20	2.17
18	Suppression of sexuality	11.93	2.52
20	Excessive intrusion into child's world	11.80	3.68
22	Desire to hasten child's development	11.13	2.89

The basic parental responsibilities relate to the child's development (according to 74.66%), care for its health and life (46.66% reported that), providing for its need for food (according to 40% of parents) and education (reported by 40%). One third of the parents (33.36%) consider it essential to educate a child morally, to provide them materially and to guarantee school education and good quality university education.

All the respondents have positive associations with their family role (that of parents and that of the mother) and accept themselves as parents: they do not limit their interests exclusively to family's cares and interests, do not have a feeling of self-sacrifice for the family or dissatisfaction with the role of the lady of the house.

However, we noticed quite contradictory data: the respondents (women) reported to be "dependent" (the mean is  $15,53 \pm 2,41$  of 20 max), low on the "dominance" scale (the mean is  $10,80 \pm 3,02$  of 20 max) and "over-authoritative" at the same time (the mean is  $14,26 \pm 2,08$  of 20 max).

Parental attitudes to children are characterized by optimal emotional contact (parents reported that they could contact child well, had partner-type relations with their children and tried to verbalize thoughts and feelings they had for their children), did not have either emotional distance or excessive concentration on their children.

The parents' self-descriptions as nurse have personal particularities. Parents consider themselves responsive, initiative, demanding, persistent, flexible, etc. Benevolence, care and diligence to the child's development were common among the parental characteristics, being self-attributed by 1/3 of the parents. At the same time, more than half of the parents (58.66%) think that they need to learn patience, tenacity and attention to their children.

In general, parents' self-attitudes stay positive, but yet show some inner contradictions. The most controversial domain is power and influence, dominance and suppression as opposed to understanding and accepting a child. This information allows us to circle the main points for developing the parental role and education responsibilities.

Child description by parents has common traits and attitudes. 75% of the parents reported their children to be friendly, and around 50% described their children as active, intellectually developed and optimistic. The main concerns of more than 26% of the parents are related to children's laziness, capriciousness, stubbornness as well as hot temper and inattention on the part of parents.

Assessing their child's strengths and difficulties, the parents reported a low level of problems for their children: the mean level of the general problem scale is  $9.71 \pm 4.35$  (of 20 max), mean social activity —  $7.42 \pm 1.82$  (from 20 max). For parents, the main difficulty is child's hyperactivity (the mean is  $4.71 \pm 1.85$ ).

So, analysis of parental attitudes to themselves as nurse and educators, perceptions of children and interaction with them made it possible to highlight the main lines of work with parents under ICDP, with the main focus on participants' comprehension of a parent's holistic role, unconditional acceptance of a child, improvement of parental capacity to recognize and control the child's emotions, support the child's ability to regulate, plan, and control its behavior.

The content analysis of the participants' feedback showed that ICDP is positively assessed (mean 9.19 of 10 max, st.dev. -0.70) and that the program motivates for self-changes in the sphere of child-parental relationships for most of the participants (89%).

The program corrected parents' attitudes: it strengthens the educator's positive role for a parent, develops the positive image of a child, and improves positive parenting skills (understanding and accepting the child's wishes, interests and abilities; emotional self-control; positive regulation of the child's behavior).

Parents of differently aged children show the same trends in changing their parental attitudes and development of positive interaction skills. The program allows parents to find inner resources for optimization of child-parental relationships.

Next step of the ICDP study in Russia will be associated with changes in parents' attitudes to themselves as nurse and educators, changes in children's images, and modified interaction with children as a result of the program (the data are being processed at the time of writing this article) as well as long-term effects of the program in post-training and follow-up after 6 and 12 months.

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