

Ohio Registry of Effective Practices

FLIP IT

School/District/Community Agency: The Devereux Center for Resilient Children

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Available for Program Consultation: Yes

Available for Presentations/Workshops: Yes

General Program Overview:

FLIP IT is a strategy which offers teachers, parents, and administrators a simple, kind, strength-based, commonsense, and effective process to address challenging behavior in young children. FLIP IT consists of four supportive steps which reduce challenging behavior while helping young children learn about their feelings and gain healthy self-control. These four steps are demonstrated in the FLIP IT mnemonic, which stands for F – Feelings, L – Limits, I – Inquiries, and P – Prompts.

First, Feelings: gently talk to the child about his feelings. Tell him what you see and hear as a result of his emotions. Help him to identify the root feelings causing the behavior.

Next, Limits: remind the child of the positive limits and expectations you have for his behavior. Establishing simple and loving limits help surround children with a sense of consistency, safety, and trust.

Third, Inquiries: encourage the child to think about solutions to his challenges. Ask questions that promote problem-solving and healthy coping skills. Inquiries invite children to think, learn, and gain self-regulation.

Finally, Prompts: provide creative cues and suggestions for the child who is having difficulty. Enthusiastic, bright ideas can lead the way to better problem-solving skills.

The goal of FLIP IT is to help children better understand their own emotions and develop emotional control through problem-solving and healthy coping skills. FLIP IT can be used to address minor day-to-day challenges and conflicts, and can also be used as a targeted intervention to support emotional growth. When used consistently, FLIP IT has the capacity to effect long-term positive change. Children who frequently experience the FLIP IT process become emotionally aware problem-solvers who develop healthy coping skills that will last a lifetime.

FLIP IT first came into existence in 2005 via a partnership between Rachel Wagner Sperry, MSW, and the Franziska Rackers Centers in Ithaca, NY. Partnership with the Devereux Center for Resilient Children began in 2006, and in 2007, the original works were turned over to Devereux for the purposes of advancing the FLIP IT concept and reaching a broader audience. Over the past 10 years, FLIP IT has expanded to become an internationally utilized training strategy, complete with an

expanded in-person training model, an e-learning curriculum, and an award-winning book titled *FLIP IT: Transforming Challenging Behavior*.

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Evidence of Effectiveness:

Research suggests that FLIP IT is an effective strategy for decreasing children's behavior problems, anxiety, depression, withdrawal, somatic complaints, delinquent behavior, aggressive behavior, and developmental problems, while increasing children's initiative, self-regulation, and attachment.

The evidence of effectiveness for local implementation of FLIP IT comes from a study completed by the Center for School-Based Mental Health Programs at Miami University (CSBMHP), which evaluated the Ohio Department of Mental Health and Addiction Services' state-wide pilot of the FLIP IT parent-training strategy. CSBMHP recruited caregivers throughout the state of Ohio to participate in a one-day in-person FLIP IT training. The primary goal of this evaluation was to determine the effectiveness of the FLIP IT parent-training program in decreasing negative social, emotional, and behavioral outcomes and increasing positive social, emotional, and behavioral outcomes among participants' children.

In order to assess outcomes, caregivers were scored on the Child Behavior Checklist (to assess behavioral, emotional, and social problems in children), the Ages and Stages Questionnaire: Social Emotional (to assess social and emotional difficulties in children), the Parenting Scale (to assess parenting practices and disciplinary strategies), and the Devereux Early Childhood Assessment Preschool Questionnaire (to assess resilience in children). Caregivers were scored at pre-test, post-test, 3-month follow-up, and 6-month follow-up points.

Scores were analyzed using ANOVAs and repeated measures MANOVAs to compare differences in mean group scores at different time points. "Improvement" was defined as a statistically significant increase in positive outcomes or decrease in negative outcomes over time, at the $p < 0.05$ level. The analysis did not specifically compare outcomes to clinical cutoff scores set by the measure developers, but instead analyzed significance of change over time in order to better capture the effectiveness of FLIP IT for all participants' children.

ANOVA analyses were completed for each scale to determine whether mean scores differed over time. Results were significant for Child Behavioral Checklist (CBCL) scores [$F(3, 426)=9.501, p=.000$], Ages and Stages Questionnaire (ASQ) scores [$F(3, 415)=9.490, p=.000$], Parenting Scale (PS) scores [$F(3, 424)=14.385, p=.000$], Parenting Stress Index (PSI) scores [$F(3, 426)=9.973, p=.000$], and Devereux Early Childhood Assessment (DECA) scores [$F(3, 425)=6.773, p=.000$]. Post-hoc analysis revealed that the scores which measured negative outcomes (CBCL, ASQ, PS, and PSI scores) were all highest at baseline and decreased consistently over time, while DECA scores were lowest at baseline and increased consistently over time. Similar results were observed for the scores' subscales.

Repeated Measures MANOVA analyses were completed for each scale to determine whether mean scores differed over time among caregivers who completed measures at each time point, while controlling for low SES and high Parenting Stress score. There was a significant effect of time point (baseline, immediate follow-up, 3-month follow-up, and 6-month follow-up) on CBCL scores [$F(3, 38)=4.994, p=.005$], ASQ scores [$F(3, 36)=3.178, p=.035$], PS scores [$F(3, 40)=5.180, p=.004$], and PSI scores [$F(3, 41)=3.741, p=.018$]. Post-hoc analysis revealed that these scores were all highest at baseline and decreased consistently over time. MANOVA analysis did not find a significant effect of time point on DECA scores [$F(3, 40)=1.655, p=.192$].

Results show that local implementation of FLIP IT has the capacity to be highly successful. The FLIP IT parent-training model produces positive, robust, and long-lasting outcomes for children, parents, and

families.

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Capacity and Resources:

Each individual who has been trained in the FLIP IT strategy has the capacity to directly impact hundreds of children. Additionally, those who have attended a Train-the-Trainer session have the capacity to impact thousands of children, both directly and indirectly. A childcare center interested in implementing FLIP IT could easily create a sustainable model of implementation by having one or more staff members attend a Train-the-Trainer session. This would allow trained staff to teach the FLIP IT strategy to new staff each year without any additional economic investment from the center.

To begin implementing the FLIP IT strategy, all that is truly needed is a training resource and some time set aside to learn and practice. This resource may be a formal in-person training, the FLIP IT online e-learning course, a copy of FLIP IT: Transforming Challenging Behavior, or even just a FLIP IT poster. Free information and resources, including a free informational webinar offering the basics for implementing the strategy, are available on FLIP IT's website, www.moreflipit.org.

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Family and Community Partnerships:

As the local implementation of FLIP IT was a pilot study of a parent-training program, caregivers of children aged 3 months through 14 years were recruited from 30 counties throughout the state of Ohio. Parents of children under age 9 were recruited from childcare facilities, early childhood learning centers, preschools, and elementary schools to participate in a one-day parent training session. Parents who enrolled as study participants were also asked to complete a set of baseline surveys, along with three sets of follow-up surveys (immediately after training, at 3 months post-training, and at 6 months post-training).

Engagement was maintained by stressing the importance of using the FLIP IT strategy frequently. Parents were taught that FLIP IT is most effective when used consistently and often. If a similar parent-training program were to be implemented in the future, researchers at Miami University feel that providing additional support in the form of "booster" training sessions may help parents remain engaged in the FLIP IT strategy and reduce the number of families who drop out before the program concludes.

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Sustainability Plan:

FLIP IT is a sustainable strategy because there are many channels through which teachers, parents, and other interested parties can receive training and learn how to effectively implement FLIP IT. The Devereux Center for Resilient Children offers one-day in-person training sessions throughout the country, as well as an online course where parents and teachers can learn to implement FLIP IT at their own pace. The publication of FLIP IT: Transforming Challenging Behavior also allows a greater

number of parents and teachers to learn how to implement the FLIP IT strategy without attending a formal training workshop.

FLIP IT's potential for sustainability was increased with the development of the Train-the-Trainer program. This program gives directors, supervisors, education coordinators, and others in a role of providing training and technical assistance the skills and knowledge to provide training on the use of FLIP IT in the classroom and in the home. Those who participate in the Train-the-Trainer program become FLIP IT trainers themselves, and are then able to hold their own FLIP IT training workshops. The Train-the-Trainer program is vital in ensuring FLIP IT's sustainability because it allows exponentially more teachers and parents the opportunity to participate in FLIP IT training workshops.

To ensure future sustainability, DCRC plans to continue offering one-day in-person trainings, the online e-learning course, and Train-the-Trainer workshops in order to continue to increase the number of parents and educators who can access FLIP IT training. DCRC also hopes to continue its partnership with the Ohio Department of Mental Health and Addiction Services, and hopes to connect with new partners who will further the reach of FLIP IT.

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