CIKEO: a study on parenting support in the Netherlands

No registrations found.

Ethical review	Positive opinion
Status	Recruiting
Health condition type	-
Study type	Observational non invasive

Summary

ID

NL-OMON20740

Source Nationaal Trial Register

Brief title

CIKEO - Consortium Integratie Kennisbevordering Effectiviteit Opvoedonzekerheid-Interventies

Health condition

not applicable. In the CIKEO study, (effective elements of) parenting interventions are investigated. These interventions are mainly primary and secondary preventive parenting interventions.

Sponsors and support

Primary sponsor: Erasmus MC Gemeente Rotterdam LUMC Verwey-Jonker Instituut

Source(s) of monetary or material Support: ZonMw, Programme Effectief werken in de Jeugdsector. Subsidieronde 3A:Interventies fase 2 (the cohort study is one substudy of the entire project)

Intervention

Outcome measures

Primary outcome

Our primary outcomes are various outcomes related to parenting and child development, for example parenting behavior, parenting stress, parental sense of competence, family functioning and child behavior.

Secondary outcome

n.a.

Study description

Background summary

This cohort study is part of a larger consortium study: CIKEO. The aim of the CIKEO consortium is to investigate effective elements of (preventive) parenting interventions in the Netherlands.

The aim of the cohort study is to study the exposure of parents to parenting support and interventions and to investigate what (elements of) parenting interventions are effective. The study is a naturalistic effect evaluation. There is no separate control group and no separate intervention group. The study sample is a varied opportunity sample of 1000 parents, with an overrepresentation of parents with (an increased risk for) parenting problems. All parents are asked to complete a baseline guestionnaire at inclusion and a follow-up guestionnaire 12 months later. The questionnaires include various topics related to parenting, the family situation, health and development of the child and relevant background information. In the follow-up questionnaire, additional questions are asked about parenting support (including interventions) that parents have received during the follow-up period. Additionally, when available and with permission of participants, data on received parenting support and care regarding parenting during the follow-up period will be collected from electronic files of youth health care organizations. It will be established which parents received an intervention in the follow-up period and which parents did not (a naturalistic effect evaluation). By comparing baseline and follow-up questionnaires, we want to investigate what (effective elements of) parenting support and interventions are associated with improvements in the family and/or parenting situation.

Study objective

Parenting is essential for the upbringing of social, mentally and physically healthy children.

Parenting interventions can support parents in this process. In general, parent training programs have a positive influence on various outcomes related to parenting and child development, e.g. on parenting skills, parents' self-efficacy, parenting stress and child behavior.

The number of available interventions and programs continues to grow, although the level of evidence-based knowledge varies. It is difficult for professionals to decide what intervention to choose.

The CIKEO consortium aims to provide a comprehensive overview of currently available parenting interventions and to investigate the effectiveness of (elements of) these interventions.

The cohort study described here is a sub study within this consortium. The aim is to study the exposure of parents to parenting support and/or interventions in a large cohort study and to investigate what (elements of) parenting interventions are effective. The hypothesis is that families who received (elements of) parenting support will have improved outcomes compared to comparable families that did not receive parenting support.

Study design

Unless otherwise specified; all measures are assessed both at baseline and 12 months later at follow-up.

- Family Functioning: McMaster Family Assessment Device, General Functioning subscale

- Life events

- Parenting: scales Warmth and control (Wake et al. 2007); Parenting Scale (Arnold et al. 1993)

- Parenting stress and Parenting sense of competence: (PSOC: Parenting sense of Competence (o.a. Gibaud-Wallston & Wandersman, 1978; Parenting daily hassles (Crnic & Greenberg, 1990; Crnic & Booth, 1991)

- Social Support: Multidimensional scale of perceived social support (MSPSS, Zimet et al. 1988)

- Parental psychological problems: Brief Symptom Inventory 18 (BSI18, De Beurs, 2011 – Derogatis, 1975,2006)

3 - CIKEO: a study on parenting support in the Netherlands 13-05-2025

- Happiness of parents (1 item, Abdel-Khalek, 2006)
- General health of parent and child, 1 item each.
- Child behavior: Child behavior checklist (CBCL, Achenbach & Rescorla 2001)
- Questions regarding sleep, eat and cry behavior of the child.

- Use of care, facilities and interventions (more extensive in follow-up questionnaire than in baseline questionnaire)

- Questions and concerns with regard to parenting (more extensive in follow-up questionnaire than in baseline questionnaire)

- Various demographics and other covariates (more extensive in baseline than follow-up)

When available and with written permission from the participants, we will collect data on received parenting support and care regarding parenting during the follow-up period from electronic files of the youth health care organizations, in addition to the questionnaires.

Intervention

The aim of the cohort study is to investigate effective elements in various (preventive) parent training programs and interventions, in a naturalistic effect evaluation.

The study sample is an opportunity sample, consisting of two groups for inclusion. Group A consists of approximately 800-1000 parents that regularly visit youth health care organizations. Eligible parents with children aged 0-7 years are invited to participate in the study. Group B consists of parents who will participate in a parenting intervention during the follow-up period. The main focus is on parenting interventions that are included in the database for effective interventions of the Netherlands Youth Institute. We hope to include parents who participate in the following interventions:

1 Coach je kind

- 2 Gordon-training: Effectief communiceren met kinderen
- 3 Incredible Years (basis)
- 4 Kortdurende Video-Hometraining (K-VHT) in gezinnen met jonge kinderen

5 Video-hometraining (VHT) in gezinnen met kinderen in de basisschoolleeftijd

6 Moeders Informeren Moeders (MIM)

- 7 Opvoeden & zo
- 8 Pedagogisch adviseren

9 Themis Opvoedcursus - Voor moeders uit niet-westerse migrantengroepen

10 Triple P

11 Video-feedback Intervention to Promote Positive Parenting and Sensitive Discipline (VIPP-SD)

- 12 Praten met kinderen
- 13 Peuter in Zicht
- 14 Drukke kinderen
- 15 NIKA
- 16 Stap voor stap 2
- 17 Stevig Ouderschap
- 18 VoorZorg
- 19 Beter Omgaan met Pubers
- 20 Home-Start
- 21 Shantala babymassage

However, parents participating in other interventions will be included as well.

This study is a naturalistic effect evaluation. There is no separate control group and no separate intervention group in this cohort study. The total study sample, groups A and B combined, will be a varied sample with an overrepresentation of parents with (increased risk of) parenting problems. All participating parents will be asked to complete baseline and follow-up questionnaires. In the study, it will be established which parents received an intervention and which parents did not (a naturalistic effect evaluation). The goal is to investigate what (effective elements of) parenting interventions are associated with a

decrease in problems and improvements in positive outcomes related to parenting.

Contacts

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Eligibility criteria

Inclusion criteria

The study sample is an opportunity sample, consisting of two groups for inclusion. Group A consists of approximately 800-1000 parents that regularly visit youth health care organizations. Inclusion criteria are: parents with children aged 0-7 years.

Group B consists of parents with children aged 0-7 years, who will participate in a parenting intervention during the follow-up period.

Exclusion criteria

Parents should be able to read and understand the basics of the Dutch language, because the questionnaires used in the study are in Dutch.

Study design

Design

Study type:	Observational non invasive
Intervention model:	Parallel
Allocation:	Non controlled trial
Masking:	Open (masking not used)
Control:	N/A , unknown

Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	01-10-2017
Enrollment:	1000
Туре:	Anticipated

IPD sharing statement

Plan to share IPD: Undecided

Ethics review

Positive opinion	
Date:	05-11-2018
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL7342
NTR-old	NTR7607
Other	MEC-2017-432 : MEC van Erasmus MC, Rotterdam

Study results