Care for Each Other. Stimulating Fellow Care in sheltered housing for homeless people.

No registrations found.

Ethical review	Not applicable
Status	Pending
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON26695

Source NTR

Brief title PROZE (Project Zorg voor Elkaar)

Health condition

Homeless_Persons; Self_Care_(rehabilitation); Peer_Group; Social_reinforcement; Social_Behavior; Social_support; Social_Control; Group_Mediated_Social_Control; Peer_Driven_Intervention.

Sponsors and support

Primary sponsor: CVO-Addiction Research Center Keulsekade 22 3531 JX Utrecht The Netherlands Tel +31 (0)30 2381495 Fax +31 (0)30 2381496 info@drugresearch.nl http://www.drugresearch.nl/ Source(s) of monetary or material Support: ZonMw programma Maatschappelijke Opvang.

Intervention

Outcome measures

Primary outcome

1. Percentage of participants reaching the 'Uitstroomtafel' and moving towards a more independent housing situation;

2. Percentage of participants moving into independent (regular) housing;

3. The time between the 'Instroomtafel' and the 'Uitstroomtafel' (the time of residency in the sheltered housing (MO) facility) and the 'milestones' distinguished in the 8-step plan towards independent housing;

4. Drop out rates and relapse-the percentage of participants leaving the sheltered housing facility against staff advise and the percentage of participants relapsing into homelessness after moving into independent housing.

Secondary outcome

- 1. Time spent on "Activities of Daily Living" (ADL) and daily domestic activities (HDL);
- 2. Financial management (income, debt, clothing, nourishment);
- 3. Time spent on (volunteer) occupational activities;
- 4. Mental health status and addiction problems;
- 5. Physical health;
- 6. Quality of life, general well-being;

7. Social contacts (e.g. social network size, number and duration of contacts, conflict management).

Study description

Background summary

Studies show that the continuity in the chain of services for homeless people in the Netherlands is suboptimal. Too few clients of day and night shelters make use of supplementary services, while staff hesitate to refer clients to these services. New housing

2 - Care for Each Other. Stimulating Fellow Care in sheltered housing for homeless p ... 11-05-2025

and care projects are being developed but evidence-based working methodologies for working with this complex target group are largely absent.

Although not always visible in the world of homelessness, homeless often support one another in various ways. On the street you may not be friends, but mutual support and exchanges are quite common. When professional help is out of reach and at moments of crisis, the homeless have to make due with one another. Within their networks find understanding (fellow feeling), support and protection. Such 'Fellow Care' could offer an important starting point for social support, but is barely used within homeless care and shelter facilities.

The concept of fellow care (caring for each other) is central to the proposed strategic study. The goal is to develop and transfer knowledge about fellow care to homeless care workers and to involve the client population into this process. The fellow care intervention stimulates existing (latent) care intentions among the participants and will be directed towards supporting reaching (individual and collective) care and treatment targets. Towards this objective, a Peer Driven intervention (PDI) will be implemented, based on the theory of Group Mediated Social Control, which hypothesizes that behaviour change is established not merely through one-on-one relations but also, and primarily, through social influence in peer groups. The planned PDI uses a structured system of incentives that aims to stimulate participants to support each other in reaching individual and collective care and treatment goals, with the goal of preventing/reducing drop out from the sheltered housing facility and improve the flow in the care and treatment chain.

Towards the implementation of the intervention and trial, a collaborative agreement has been established between the Utrecht Addiction Research Center (CVO), JellinekMentrum (Arkin) en HVO Querido (both in Amsterdam), the Technical University (Hogeschool) Utrecht and the Basisberaad Rijnmond (client advocacy). The PDI will be implemented by JellinekMentrum staff (ACT/bemoeizorgteams) in two sheltered housing (MO) facilities of HVO Querido. A (preliminary) project group has been established with representatives of the participating organisations.

Study objective

Compared to standard care, Peer Driven Fellow Care combined with standard care will result in significantly less drop out and improved flow in the social rehabilitation process for homeless people, as well as in significant improvements in participant autonomy in the areas of housing, employment, health, quality of life and other treatment and care goals.

Study design

Five measurements:

Baseline, month 2, month 4; month 10 and month 22 after enrolment into the study.

Intervention

The standard intervention includes support and care services of the participating sheltered housing facilities (HVO-Querido, Amsterdam) and Assertive Community Treatment provided by Jellinek-Mentrum.

In addition to the standard care, the experimental intervention includes participation in a peer-driven support group, working on mutual social support in triads, and the use of group-mediated incentives in support of treatment and care goals.

Contacts

Public

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Eligibility criteria

Inclusion criteria

1. (Former) homeless or residentially housed people belonging to the target group of the 'Plan van Aanpak MO' of the city of Amsterdam;

2. 18 years or above;

3. Willing to participate in the intervention and the regular activities of the housing/care facility;

4. Registration at the municipal resident register (GBA) at the address of one of the participating housing/care facilities during the implementation of the Peer Driven Intervention;

5. Ability to provide informed consent;

6. Dutch language skills and coherence at a level required for participation in the study measurements.

Exclusion criteria

Not meeting the inclusion criteria (addiction and mental health problems are no reasons for exclusion).

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	Active

Recruitment

NL	
Recruitment status:	Pending
Start date (anticipated):	01-05-2009
Enrollment:	206
Туре:	Anticipated

Ethics review

Not applicable Application type:

Not applicable

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	NL1562
NTR-old	NTR1640
Other	: 101200003
ISRCTN	ISRCTN wordt niet meer aangevraagd

Study results

Summary results N/A