

Validation of the ALPHA-NL (antenatal psychosocial health assessment)

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Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Other condition
Study type	Observational non invasive

Summary

ID

NL-OMON45621

Source

ToetsingOnline

Brief title

Validation ALPHA-NL

Condition

- Other condition

Synonym

risk-factors child abuse

Health condition

psychosociale problematiek waaronder risicofactoren kindermishandeling

Research involving

Human

Sponsors and support

Primary sponsor: TNO

Source(s) of monetary or material Support: ZonMw

Intervention

Keyword: child abuse, prenatal, validation

Outcome measures

Primary outcome

Two outcome measures:

- The extent of worries and concerns with the circumstances for the (unborn) child.
- The conclusion whether additional psychosocial services are required for clients during pregnancy to prepare them for parenthood.

Secondary outcome

Non-response analysis with background features of respondents and the two outcome measures as determined by the midwife/obstetrician through care as usual (with ALPHA-NL).

Study description

Background summary

The Dutch prevalence of child abuse and neglect is estimated at 119.000 children a year (Alink et al, NPM-2010). According to Stith et al (2009) in the National Guideline Child Abuse & Neglect for Youth Health Care professionals (Vink et al, 2016) the strongest risk factors for child abuse and neglect are not child-related but are risk factors related to (both) parents and the way they cope with these risk factors. Risk factors are: poverty, family violence, mentally challenged, psychiatric disease, substance abuse.

Strong predictors for child abuse and neglect are the ways in which parents cope with these issues: with depression, hyperreactivity, anger, perception of child as a problem ... These experiences can have a life-long effect on children (Felitti, 1998).

Because these risk factors are parent-related, they can already be identified before birth. The prenatal period therefore offers a window of opportunity for the prevention of child abuse and neglect. Prenatal caregivers see parents-to-be frequently during pregnancy and are pre-eminently in the position to recognize the first risk factors. When recognition is followed by adequate services for these families at risk this can be very beneficial in the prevention of child abuse and neglect.

Many midwives and obstetricians in the Netherlands use the ALPHA-NL as an assessment instrument for riskfactors for child abuse and neglect.

De ALPHA-NL is the Dutch version of the Canadian ALPHA (Antenatal Psychosocial Assessment; Carroll, 2005; Robertson, 2006), a self-report questionnaire with 48 questions (mostly 5-point Likert) concerning 15 risk factors for child abuse and neglect. The ALPHA-NL is administered before the 20-weeks gestation period. The results form the starting-point for a dialogue on these issues, between midwife/obstetrician and parents-to-be.

Study objective

The aim of our study is to validate the ALPHA-NL. This is important for midwives/obstetricians, and in the end clients, to be able to work evidence-based.

Research questions are:

- What is the reliability of the ALPHA-NL?
- What is the concurrent criterium validity of the ALPHA-NL?
- To what extent is the conclusion of the midwife/obstetrician based on the ALPHA-NL, in accordance with the conclusion of the psychologist based on reference questionnaires and interview?

Study design

Our study will be conducted by observational design.

Recruitment of participants is done by midwives/obstetricians. Subsequently participants have an appointment with a psychologist to fill in a questionnaire and for an interview.

The correlation between the outcomes with the psychologist and the outcomes with midwives/obstetrician through 'care as usual' is identified.

Study burden and risks

There are no risks for participants.

The burden consists of the time necessary (max 1 hour) to fill in the questionnaire and have the validation interview with a psychologist (at the location of the midwifery practice). Each participants receives a compensation of 30 euro.

The burden may also be psychological. The reference-questionnaire (consisting of SCL-90, CISS-NL, PSS-14, ZIL, AV-AL or DHS) concerns issues such as mental well-being, coping en stress. In the validation-interview issues such as family violence, child abuse and neglect during childhood are discussed. With some participants this may trigger awareness and emotional arousal. These participants will be offered an additional consultation with the psychologist and/or referral to her midwife/obstetrician and/or GP.

Contacts

Public

TNO

Laan van Nieuw Oost-Indië 334

Den Haag 2593 CE

NL

Scientific

TNO

Laan van Nieuw Oost-Indië 334

Den Haag 2593 CE

NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adolescents (12-15 years)

Adolescents (16-17 years)

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

- Gestation 9 - 20 weeks
- Age from 18 years (in exceptional cases from 16 years) and capacitated.
- Been through assessment with the ALPHA-NL with the midwife/obstetrician as part of 'care as usual'
- Able to read and understand Dutch
- Informed consent

Exclusion criteria

- not capable of reading Dutch (well enough)
- 20+ weeks gestation
- younger than 16
- no consent

Study design

Design

Study type: Observational non invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Prevention

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 01-12-2017

Enrollment: 173

Type: Actual

Ethics review

Approved WMO

Date:	21-07-2017
Application type:	First submission
Review commission:	METC Amsterdam UMC

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
CCMO	NL61142.018.17