

Effects of VIPP-V parenting-training for parents of young blind or visually impaired children

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The goal of this study is: 1) to adapt Video-feedback Intervention to promote Positive Parenting (VIPP) for parents of children with a visual impairment or visual-and-intellectual disabilities (VIPP-V), 2) to test the resulting program on its...

Ethische beoordeling	Positief advies
Status	Werving gestart
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON23805

Bron

NTR

Verkorte titel

Effect of VIPP-V for parents of children with visual impairments

Aandoening

Parent-child interaction, Attachment problems, Sensitive responsiveness, Positive parenting, Video-feedback intervention, Visual impairments, Visual-and-intellectual disabilities, Children

Ondersteuning

Primaire sponsor: VU University, Department of Clinical Child and Family Studies;
Bartiméus;
Koninklijke Visio

Overige ondersteuning: Zon-Mw InZicht, The Netherlands Organization for Health Research and Development

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Primary outcome measures are the sensitivity of parents for the behaviors of their child with a visual impairment or visual-and-intellectual disability and the quality of the parent-child interaction; the levels of parenting stress; and the self-efficacy of the parent with regard to parenting.

Toelichting onderzoek

Achtergrond van het onderzoek

For parents of children with a visual impairment the focus on the parent-child relationship is very important as the child's behavior and interaction and their attempts to communicate with their parents are so different and difficult to understand (Howe, 2006). Also, the parent may experience the child to be unresponsive due to absence of emotional expressions, e.g. the child having a blank face (Tröster & Brambring, 1992). For parents with a child with a visual-and-intellectual disability this may also be the case due to the relatively slow speed at which the child processes social information and therefore the delayed reaction given by the child, or even the absence of a reaction (Anderson, 2001). Howe (2006) noted that due to the difficulty to understand and interpret the child's needs and behaviors, parental stress may increase, reducing the emotional availability of the parent, and therefore the parent may be a less responsive caregiver. Through early intervention programs parents can learn to relate with their blind children in sensorily appropriate and attuned ways (Affleck et al., 1997). The problem chosen to study is therefore to address the gap in evidence-based early intervention with infants with visual and visual-intellectual disabilities, building on the model of proven effective interventions in other populations.

The intervention VIPP-V (Video-feedback Intervention to promote Positive Parenting for parents of children with Visual and visual-intellectual disabilities) is an intervention designed to help parents interpret and understand the behavior of their child with a visual impairment or visual-and-intellectual disability, and respond to the child's signals in a sensitive way to improve parent-child interaction. Video-feedback Intervention to promote Positive Parenting (VIPP) has been adapted for several subpopulations and proven effective.

VIPP-V has been extended with specific topics applicable for parents of children with a visual impairment. Added and/or adapted themes are:

1. Predictability, exploration and a safe environment
2. Autonomy, making demands and dealing with change and frustration
3. Sharing of attention, joint attention
4. Recognizing and naming emotions, empathy and induction

The two main aims of the current study are to adapt VIPP for parents of children with visual impairments (VIPP-V), and to test the effectiveness of this adapted intervention. If the

intervention will be effective, it should be implemented widely in early intervention services for families with a visually impaired child.

A randomized controlled trial (RCT) will be conducted to assess effectiveness of VIPP-V. Parent-child dyads will be randomized into two groups: 50 dyads will receive VIPP-V + care-as-usual and 50 dyads will receive care-as-usual. Families with a child (9 months to 5 years of age) with a visual impairment will be recruited for participation in the study. A baseline assessment will take place approximately one week before the start of the intervention (T1). After the intervention, posttest data will be gathered (T2). Three months after the posttest there will be a follow-up assessment (T3). Parent-child dyads in the control condition will be assessed at the same time points.

Primary outcome measures are the sensitivity of the parents for the behaviors of their child with a visual impairment or visual-and-intellectual disability and the quality of parent-child interaction. Secondary outcome measures are self-efficacy of the parent with regard to parenting and parenting stress. The experiences of the early intervention workers with regard to using VIPP-V in early intervention are studied as outcomes regarding feasibility of implementation. Moderator variables are the child's developmental age, the working alliance between parent and intervention worker and empathy of the intervention worker.

Doel van het onderzoek

The goal of this study is:

- 1) to adapt Video-feedback Intervention to promote Positive Parenting (VIPP) for parents of children with a visual impairment or visual-and-intellectual disabilities (VIPP-V),
- 2) to test the resulting program on its effectiveness in a randomized controlled trial (RCT) with two groups: one group will receive VIPP-V and one group will receive care-as-usual, and
- 3) to prepare the field for broad scale implementation if the program is effective.

The main expectations of this study are:

- VIPP-V will have a stronger positive effect on the sensitive responsiveness of the parents and parent-child interaction than care-as-usual
- Parents in VIPP-V will show a stronger decrease in parenting stress and a stronger increase in parental self-efficacy than parents in the care-as-usual condition

Onderzoeksopzet

Assessment points:

Baseline (T1): approximately one week before the intervention starts

Post-test (T2): approximately one week after finishing the program = five months after baseline

Follow-up (T3): approximately three months after finishing the program = eight months after baseline

Parent-child dyads in the control condition will be assessed at the same time points.

Onderzoeksproduct en/of interventie

VIPP-V is developed for parents of children with visual impairments, and focuses on the specific behavioral repertoire of children with a visual impairment. The intervention consists of seven home-visits: five regular home-visits scheduled every other week, and two booster sessions in the next two months. The overall duration of the intervention will be five months. VIPP-V will be conducted by specially trained early intervention workers of Koninklijke Visio and Bartiméus. These organizations are two national centers supporting visually impaired persons and their families.

The intervention will target the behavior of the primary caregiver, usually the mother. The father is invited to attend the last two sessions. Every home-visit follows the same structure: in the first part of the home-visit parent-child interaction will be video-taped, in the second part of the home-visit these recordings will be discussed and the intervention worker will give feedback on the interaction. Parents will learn how they can interpret and understand the behavior of their child with a visual impairment or visual-and-intellectual disability.

Furthermore, sensitive and responsive ways of responding to the child's behavior will be discussed. VIPP-V is based on attachment theory, focusing on increasing parental sensitivity and the parent-child interaction. During the home-visits, information about the visual impairment and positive parenting will be given to the parent.

The intervention workers use a protocol in which the goals and activities of each home-visit are described. This way all home-visits are equal for all families. However, because of the individualized feedback on the video recordings, the intervention can be tailored to the specific needs of each parent-child dyad. Each home-visit contains information on the themes 'sensitive responsiveness' and 'visual impairment'. The suggestions made by the intervention worker on the video recordings are expected to be practiced for the following home-visit. In the last two sessions all the themes will be repeated.

VIPP-V themes:

Sensitive responsiveness themes:

1. Exploration versus attachment behavior

2. Speaking for the child
3. Sensitivity chain (signal from child – parent's response – child's reaction)
4. Sharing of emotions and corrective messages

Visual impairment themes:

1. Predictability, exploration and a safe environment
2. Autonomy, making demands and dealing with change and frustration
3. Sharing of attention, joint attention
4. Recognizing and naming emotions, empathy and induction

The control group will receive care-as-usual.

Contactpersonen

Publiek

VU University, Department of Clinical Child and Family Studies
Van der Boechorststraat 1, kamer 3B14
Mathilde M. Overbeek
Amsterdam 1018 BT
The Netherlands
+31 (0)20 5988891

Wetenschappelijk

VU University, Department of Clinical Child and Family Studies
Van der Boechorststraat 1, kamer 3B14
Mathilde M. Overbeek
Amsterdam 1018 BT
The Netherlands
+31 (0)20 5988891

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. Children with visual impairments or visual-and-intellectual disabilities
2. Children aged between 9 months and 5 years, and their primary caregivers
3. Parent(s) have given informed consent for participation in the study.

(Parents with a visual or auditory disability will be included as participants. Parents who are blind and/or deaf will be included as extra case studies, as it is not yet known how these parents can use video feedback).

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Children who do not live at home, for example due to hospitalization for serious medical problems.
2. Parents with an intellectual disability. For these parents an adapted training (VIPP-LD) is developed and tested by researchers of the VU University Amsterdam.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	Geneesmiddel

Deelname

Nederland	
Status:	Werving gestart

(Verwachte) startdatum: 01-09-2013
Aantal proefpersonen: 100
Type: Verwachte startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nog niet bepaald

Ethische beoordeling

Positief advies
Datum: 05-12-2013
Soort: Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL4153
NTR-old	NTR4306
Ander register	NL47334.029.13 CCMO : 60-00635-98-126 ZonMw
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Resultaten

Samenvatting resultaten

N/A