

Including manualized components in home visitation to reduce risk for child maltreatment

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(1) Including manualized components designed to target four key risk factors for child maltreatment (low parental self-efficacy, stress, parental anger, and post-traumatic stress symptoms) ameliorates these risk factors; (2) including these...

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

Samenvatting

ID

NL-OMON25428

Bron

Nationaal Trial Register

Verkorte titel

N/A

Aandoening

Risk for child maltreatment

Ondersteuning

Primaire sponsor: University of Amsterdam

Overige ondersteuning: This study is funded by The Netherlands Organisation for Health Research and Development (ZonMw; grant number: 741100002).

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

parental self-efficacy, perceived stress, parental anger, post-traumatic stress symptoms

Toelichting onderzoek

Achtergrond van het onderzoek

This study tests whether home visitation to prevent child maltreatment can be improved by including discrete manualized components targeting four key risk factors for child maltreatment (low parental self-efficacy, high levels of perceived stress, parental anger, and post-traumatic stress symptoms). Home visitation is widely implemented, but effects on child maltreatment risk tend to be modest at best. Home visitation tends to have the benefit of flexibility and we will test whether including discrete manualized components increases program effectiveness, by ensuring that key risk factors are addressed, while maintaining flexibility. In addition to the overall components effects, we will test whether any component effects on reduced risk for child maltreatment can be explained (i.e., is mediated) by ameliorated risk factors. Lastly, we will use moderator analyses to test whether the components are more effective for some mothers (e.g., those at highest risk for child maltreatment) than for others.

Doel van het onderzoek

- (1) Including manualized components designed to target four key risk factors for child maltreatment (low parental self-efficacy, stress, parental anger, and post-traumatic stress symptoms) ameliorates these risk factors;
- (2) including these manualized components in a home visiting program improves parenting practices and reduces the risk for child maltreatment;
- (3) the effect of the manualized components on reduced risk for child maltreatment can be explained (i.e., is mediated) by amelioration of the four targeted risk factors;

Onderzoeksopzet

Mothers will fill out questionnaires at four time points: before and after each of the two home visits. Outcome variables include ,

Onderzoeksproduct en/of interventie

Mothers (398) in the experimental group will receive two consecutive home visits including the manualized components, while mothers in the control group will receive regular home visits (care as usual).

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Mothers at risk for child maltreatment who are enrolled in the Supportive Parenting home visiting program

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

None

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd

Blindering:	Enkelblind
Controle:	Actieve controle groep

Deelname

Nederland	
Status:	Werving gestart
(Verwachte) startdatum:	25-03-2019
Aantal proefpersonen:	398
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:	07-09-2019
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	NL8005
Ander register	Ethics Review Board of the Faculty of Social and Behavioral Sciences of the University of Amsterdam : 2018-CDE-9258

Resultaten