

Forensic Network Coaching: improving social networks among a forensic psychiatric outpatient population

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

Samenvatting

ID

NL-OMON25630

Bron

Nationaal Trial Register

Verkorte titel

FNC

Aandoening

-Social network, social support, randomized controlled trial, psychiatric treatment, criminal recidivism, loneliness

Ondersteuning

Primaire sponsor: Arkin, Inforsa Forensic Outpatient Care

Overige ondersteuning: Stichting tot Steun VCVGZ

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Toelichting onderzoek

Achtergrond van het onderzoek

Background: Forensic psychiatric patients often suffer from a multitude of severe psychiatric and social problems. Meanwhile multimodal evidence-based interventions are scarce and treatment effectiveness is in need of improvement. The main goal of forensic psychiatric treatment is to address psychiatric and social factors and thereby mitigate criminal behaviour. Notably, a supportive social network is an important protective factor for criminal behaviour. As such, improving a poor social network may decrease the risk of criminal recidivism. This study aims to examine the effectiveness of the addition of an informal social network intervention (FNC) to treatment as usual (TAU) among forensic psychiatric outpatients.

Methods: In a mono-center randomized controlled clinical trial with two parallel groups, forensic psychiatric outpatients with social network-related problems (N = 105) will be allocated to either TAU + FNC or TAU alone. The informal social network intervention consists of a 12-month coaching intervention, performed by the forensic network coach (a volunteer trained by an informal care institute). Assessments will be conducted at baseline and 3 months, 6 months, 9 months, 12 months, and 18 months after baseline. The primary outcome variable is mental wellbeing. Psychiatric functioning, criminal recidivism, substance abuse, quality of life, social network, social support, loneliness and self-sufficiency are included as secondary outcomes. A variety of potential mediators and moderators of effectiveness will be explored. Additionally, a qualitative evaluation of effectiveness will be performed.

Discussion: This study will contribute to the existing literature of forensic treatment effectiveness as it is the first RCT examining the effectiveness of adding a social network intervention in a forensic outpatient population. If effectiveness is shown, forensic mental health care could be optimized by collaborating with informal care or community initiatives aimed at improving a positive social network. In addition, results will provide insight regarding mediators and moderators of treatment effectiveness.

Doel van het onderzoek

- We expect patients in the TAU+ condition to report higher mental well-being rates as compared to patients in the TAU-condition after 12 and 18 months.
- We expect a decrease of psychiatric problems, criminal recidivism, addiction and loneliness in the TAU+ condition as compared to patients in the TAU condition.
- We expect patients in the TAU+ condition to report higher levels of quality of life, quality of

the social network and social support.

Onderzoeksopzet

Baseline and 3 months, 6 months, 9 months, 12 months, and 18 months after baseline. Number of crime occurrences and recidivism rates, will be determined at 12 months and 36 months after baseline assessment

Onderzoeksproduct en/of interventie

TAU consists of a variety of treatments and interventions in forensic outpatient mental health care such as forensic flexible assertive community treatment (forensic FACT), CBT-interventions or pharmacotherapy. In the TAU+ condition a so called forensic network coach will be added to treatment as usual during a period of at least three to maximum twelve months. The coach will be conducting an intervention called: 'Of course, a network coach!'. The purpose of the intervention is to increase social self-sufficiency in 10 steps.

Contactpersonen

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. Subject is at least three months in treatment at Inforsa and committed to treatment or capable of accomplishing appointments according to his or her clinician.
2. Subject is diagnosed with addiction, psychiatric or personality disorder according to DSM-IV-TR criteria.
3. Subject is aged 16 years or older.
4. Subject is indicated as limited self-sufficient at participating in society and organizing social support; a score of 3 or lower on items concerning the social network and participation in society as measured with the Self-Sufficiency Matrix (ZRM).
5. Subject is not completely satisfied with their social relations and the support in their network; a score of 5 or lower on the items concerning social relations as measured with the Manchester Short Assessment of Quality of Life (MANSA).

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Acute psychotic symptoms according to the clinician and/or DSM-IV-TR criteria as measured with the Mini International Neuropsychiatric Interview (MINI).
2. Current high risk for suicide requiring immediate intervention according to the clinician and/or DSM-IV-TR criteria as measured with the Mini International Neuropsychiatric Interview (MINI).
3. Severe addiction problems indicated by a score of 4 on the Health of the Nations Outcome Scales (HoNOS) or severe conditions requiring immediate intervention or hospitalisation.
4. Current high risk for severe aggression towards clinicians or others indicated by a score of 3 or higher on the Health of the Nations Outcome Scales (HoNOS).
5. Potential subject is included in project 'Biofeedback in treatment of aggression'.

Onderzoeksopzet

Opzet

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

Deelname

Nederland	
Status:	Werving gestopt
(Verwachte) startdatum:	23-04-2018
Aantal proefpersonen:	105
Type:	Werkelijke startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nog niet bepaald

Ethische beoordeling

Positief advies	
Datum:	16-04-2018
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

ID: 35026
Bron: ToetsingOnline
Titel:

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL6975
NTR-old	NTR7163
CCMO	NL30308.075.10
OMON	NL-OMON35026

Resultaten