The effectiveness of Nurse Family Partnership intervention.

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Compared to children receiving usual care, children receiving the NFP-intervention will have better birth outcome, growth and development, psycho-social outcomes and behavioral outcomes in the first years of life, and also later in life.

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

Samenvatting

ID

NL-OMON26375

Bron
NTR

Verkorte titel
Nurse Family Partnership

Ondersteuning

Overige ondersteuning: ZonMw

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

At the start of the study women will be interviewd about their physical condition (diseases, diet, sigarette smoking, drug abuse, etc.), emotional (feelings of anxiety and depression, a history of abuse or neglect), relational (partner, social support), and social determinants (education, financiel problems, housing, use of current health care). Mothers' sense of control about her circumstances is determined. Partners are being asked to report emotional or behavioral problems. A urine sample will be taken to determine urinary infections.
During the entire study measurements of height and weight, breast- or bottle feeding, and

development according to Van Wiechen, collected by the regular health system will be used in the study. Also, data of the delivery and first week after birth will be collected from the files of primary health care. At the age of 6 months, we measure development, anxiety and mother-child interactions. At the ages of 1 and 2 years the home situation will be observed according to safety, availability of food and fruit and of toys. At the age of 2 other determinants are: child abuse, finance, home, education, anti conception, pregnancies, stability relation with the father, psychopathology of the mother.

Toelichting onderzoek

Achtergrond van het onderzoek

Implementation and research of the Nurse Family Partnership intervention, in which risk factors threathening the physical, the cognitive and the behavioral development during pregnancy and in the first 2 years of life are being reduced in yet-to-be-born children of high-risk mothers. The ultimate goal is to improve pregnancy and birth outcomes for mother and child, to improve personal development and the opportunities for education and work for the mothers in order to make her more available for her child.
The study design is besed on a trial with 456 selected pregnant hig-risk mother randomly divided into a control and an intervention group. The high-risk pregnant women will be visited regularly by nurses during pregnancy, after the child is born, and 6 months, 1 year and 2 years after birth. During these visits the nurses will systematically adress (1) changes in mothers' behavior to promote the infants' health and development and to improve mothers'living circumstances with an emphasis on the improvement of diet and physical health and the reduction of substance use during pregnancy, (2) the quality of supportive relationship, and (3) the link between the mother and the regular services.

Doel van het onderzoek

Compared to children receiving usual care, children receiving the NFP-intervention will have better birth outcome, growth and development, psycho-social outcomes and behavioral outcomes in the first years of life, and also later in life.

Onderzoeksproduct en/of interventie

The Nurse Family Partnership intervention exists of an intensive schedule of approximately 30 home visits (maximal 60) by experienced youth health nurses. The home visits will start from the 16th week of pregnancy en will last until the child is 2 years of age. The frequency is about 2 visits each month with a higher frequency (once a week) in the first month of the programme and the first 6 weeks after birth, with a declining frequency (once a month) in the last 4 months. Every home visit lasts 1 to 1.5 hours.
Control: care as usual.

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. No previous born child (a number of pregnant women did have an abortion);
2. Pregnancy duration of maximum 28 weeks;
3. Low education grade;
4. Some knowledge of the Dutch language; 5. Furthermore, one or more of the following secundary inclusion criteria: no (supportive) social network or partner, alcohol - or drugabuse, actual violence in family or partner, history of abuse, psychologic problems such as anxiety or depression, non-realistic approach about motherhood, drop-out of school, unemployed, financial or housing-problems.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Heavy psychiatric problems or obvious psychosis;

2. Heavy drugs- or alcohol-addiction.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Blindering:	Enkelblind
Controle:	Geneesmiddel

Deelname

Nederland

Status:	Werving gestart
(Verwachte) startdatum:	01-01-2007
Aantal proefpersonen:	456
Type:	Verwachte startdatum

Ethische beoordeling

Positief advies

Datum:	19-12-2006
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	NL840
NTR-old	NTR854
Ander register	: N/A
ISRCTN	ISRCTN16131117

Resultaten

Samenvatting resultaten
N/A