

Effectiviteit van de 'Houd me Vast' relatieverbeteringscursus voor ouders met jonge kinderen

Gepubliceerd: 31-12-2019 Laatst bijgewerkt: 18-08-2022

Parents participating in the HmT-PYC course will show improvement on outcome measures post-treatment and at follow-up compared with the pre-treatment waiting period.

Ethische beoordeling	Niet van toepassing
Status	Werving gestart
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON26933

Bron

Nationaal Trial Register

Verkorte titel

HmT-PYC

Aandoening

Relationship problems

Ondersteuning

Primaire sponsor: None

Overige ondersteuning: None

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

- Satisfaction subscale of the Dyadic Adjustment Scale (DAS-SAT; Spanier, 1976).

Toelichting onderzoek

Achtergrond van het onderzoek

Rationale and objective:

Young children draw heavily upon the couples' resources in terms of time and energy that may put the couples' relationship under stress. It is well known that relationship satisfaction shows a significant and marked decline after the birth of the first child (Doss, Rhoades, Stanley, & Markman, 2009). For the well-being of parents and their children, therefore, it is important to help young parents to strengthen their relationship. This study is designed to assess effectiveness of the Hold me Tight program for Parents with Young Children (HmT-PYC).

Design:

The research design applied will be a within-subjects clinical trial consisting of three waves: (1) a waiting period of approximately one month prior to HmT-PYC program; (2) the HmT-PYC program which will be delivered in one weekend; (3) a booster session approximately 4 weeks later; and (4) a follow-up assessment two months after the booster session. Each couple functions as its own control during the waiting period prior to the HmT-PYC program.

Study population:

Couples with young children will be screened for eligibility over the phone. Experienced psychotherapists check exclusion criteria, i.e. DSM axis I and II diagnoses, and whether partners already receive individual or couple therapy. Couples will be informed about the research project and asked to sign the informed consent. We aim at 50 couples at least.

Intervention:

The protocol-driven intervention is an adapted version (Van der Ende & Pereira, 2019) of the official, ICEEFT approved, Dutch translation of the HmT program (Eekhoudt, Aarnoudse, & Van Nuland, 2010). HmT-PYC will be delivered to groups of 4 to 10 couples by two or three trainers or psychotherapists during one weekend followed by a booster session 3 to 4 weeks later. The following topics are covered: (1) psycho-education about attachment; (2) recognition of dysfunctional interaction patterns; (3) recognition of attachment fears and attachment needs; (4) reliving a conflict while de-escalating; (5) disclosure of attachment fears and attachment needs while the partner is accessible and responsive; (6) forgiving and trust; (7) touch and sexuality; and (8) relapse prevention. HmT-PYC differs from the regular HmT program since it pays attention to two inter-related aspects of upbringing: (a) importance of a secure attachment bond between parents and children, and (b) reconciling attachment security with the parental task of disciplining children.

Doel van het onderzoek

Parents participating in the HmT-PYC course will show improvement on outcome measures post-treatment and at follow-up compared with the pre-treatment waiting period.

Onderzoeksopzet

5
Partners will be asked to complete the questionnaires on their own in silence without consulting their partner. Repeated measures at 5 time points are needed to follow the process of change and to optimize statistical power. The 5 assessment points and the measures administered per time point (for descriptions see above under 'primary and secondary outcomes') are:

- (1) pre-waiting period assessment (approximately 3 weeks prior to pre-treatment), administered: ECR; DAS-SAT; ARE, RDS, FG, SEPTI-TS.
- (2) pre-treatment assessment (start of the treatment weekend); administered: DAS-SAT; ARE, RDS, FG, SEPTI-TS.
- (3) post-treatment assessment (end of the treatment weekend); administered: DAS-SAT; ARE, RDS, FG.
- (4) pre-booster session assessment (approximately 1 month after the treatment weekend); administered: DAS-SAT; ARE, RDS, FG, SEPTI-TS.
- (5) follow-up assessment (2 months after the booster session), administered: DAS-SAT; ARE, RDS, FG, SEPTI-TS.

Onderzoeksproduct en/of interventie

HmT-PYC.

Contactpersonen

Publiek

University of Amsterdam
Henk Jan Conradi

0205258606

Wetenschappelijk

University of Amsterdam
Henk Jan Conradi

0205258606

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Parents with young children.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

DSM axis I and II diagnoses in need of individual psychotherapy, and couples of which partner(s) already receive individual or couple therapy.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Anders
Toewijzing:	N.v.t. / één studie arm
Blinding:	Open / niet geblindeerd
Controle:	N.v.t. / onbekend

Deelname

Nederland	
Status:	Werving gestart
(Verwachte) startdatum:	01-01-2020
Aantal proefpersonen:	50
Type:	Verwachte startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nog niet bepaald

Toelichting

N/A

Ethische beoordeling

Niet van toepassing

Soort:

Niet van toepassing

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	NL9539
---------	--------

Ander register Ethics Review Board, Psychology, University of Amsterdam : 2019-CP-10064

Resultaten

Samenvatting resultaten

N/A