

# With good reason: Increasing parental involvement using argumentation in communication about treatment at the neonatal care unit (IMPACT)

Gepubliceerd: 28-08-2019 Laatste bijgewerkt: 18-08-2022

Sound/salient support of treatment recommendations with argumentations will enhance parental recall/agreement/acceptance of these recommendations and enhance their perceptions of the pediatrician/neonatologist as a credible and patient centered...

<b>Ethische beoordeling</b>	Niet van toepassing
<b>Status</b>	Werving nog niet gestart
<b>Type aandoening</b>	-
<b>Onderzoekstype</b>	Interventie onderzoek

## Samenvatting

### ID

NL-OMON27846

### Bron

NTR

### Verkorte titel

IMPACT

### Aandoening

Conditions associated with premature birth

### Ondersteuning

**Primaire sponsor:** Athena Institute | Vrije Universiteit Amsterdam

**Overige ondersteuning:** NWO VENI VI.Veni.191S.032

### Onderzoeksproduct en/of interventie

# Uitkomstmaten

## Primaire uitkomstmaten

parental involvement

## Toelichting onderzoek

### Achtergrond van het onderzoek

**BACKGROUND:** Each year, approximately 12.000 (6.9%) Dutch children are born prematurely (gestation  $\leq 37$  weeks). These children are admitted to the neonatal care unit (NCU). Hospitalization can last between days to months and is often distressful. Parental involvement has been demonstrated to have positive effects on parent and infant wellbeing. Yet, research predominantly focuses on participation in practical care activities. To increase parental involvement in communication about treatment, neonatologists should use evidence-based strategies. Medical argumentation research offers insights to define effective/teachable communication skills. Yet, to date, experimental studies investigating the effects of argumentation at the NCU are lacking.

**AIMS:** This project aims to test the effects of neonatologists' use of sound argumentation to support effective treatment decisions. Moreover (in the second phase of the project, registered separately), it explores whether argumentation theory can be taught to neonatologists to improve communication outcomes.

**METHODS:** This study entails a video-vignette experiment to assess the effects of sound and salient argumentation (vs. unsound or zero argumentation) on parent/infant-related outcomes, including parental involvement, recall of and agreement/adherence to treatment, and perceptions of the healthcare professional. Video-vignettes of role-played doctor-parent interactions will be rated by former NICU parents in an online survey environment. In a separate arm of the trial, parents will view videos wearing VR-glasses. This study is the first of two trials.

### Doel van het onderzoek

Sound/salient support of treatment recommendations with argumentations will enhance parental recall/agreement/acceptance of these recommendations and enhance their perceptions of the pediatrician/neonatologist as a credible and patient centered healthcare professional, as compared to unsound/no support of treatment recommendations.

### Onderzoeksopzet

Participants will be asked to complete a short series of questions before the intervention (Q0) as well as after having viewed the video (Q1). Q0, video viewing, and Q1 have to be completed in one sitting.

## Onderzoeksproduct en/of interventie

The use of 1. sound/salient argumentation vs. 2. unsound/not salient argumentation vs. 3. no argumentation across 3 clinical scenarios in a NICU setting. This leads to a multiple message 3x3 factorial design. In addition, 1 clinical scenario will be compared in terms of the study methods used for data collection (online survey vs. VR-glasses) in a single message 2x2 factorial design (sound vs. unsound x survey vs. VR).

## Contactpersonen

### Publiek

Vrije Universiteit Amsterdam  
Nanon Labrie

0622545249

### Wetenschappelijk

Vrije Universiteit Amsterdam  
Nanon Labrie

0622545249

## Deelname eisen

### Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Dutch speaking; Age over 18 years; having access to internet; former NICU-parent ( $\leq 5$  years ago, but not currently admitted); hospitalization infant  $\geq 1$  week; gestation at birth  $\leq 37$  weeks (= premature)

### Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

Non-Dutch speaking; age under 18 years; no access to internet; no NICU experience or more than 5 years ago; current NICU-parent or parent of a sick infant; hospitalization infant less than 1 week; gestation at birth over 37 weeks (not premature)

# Onderzoeksopzet

## Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Factorieel
Toewijzing:	Gerandomiseerd
Blinding:	Dubbelblind
Controle:	N.v.t. / onbekend

## Deelname

Nederland	
Status:	Werving nog niet gestart
(Verwachte) startdatum:	15-08-2019
Aantal proefpersonen:	495
Type:	Verwachte startdatum

## Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

**Wordt de data na het onderzoek gedeeld:** Nog niet bepaald

## 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**

NTR-new

Ander register

**ID**

NL7997

NWO (SS&H Panel) : VI.Veni.191S.032

## Resultaten