primary studies - published RCT

A randomized, controlled trial of a community-based support program for families of children with chronic illness: pediatric outcomes.

Code: PM12038883 **Year:** 2002 **Date:** 2002 **Author:** Chernoff RG

Study design (if review, criteria of inclusion for studies)

Parallel RCT.

Participants

Sample agreeing to participate N = 161 children with a chronic illness and their mother. Children with diabetes, sickle cell, CF or moderate to severe asthma were included. For CF subgroup: n = 7 assigned to the intervention group and n = 6 controls. Included children aged 7 - 11years living within 80 km radius of Baltimore, with no learning disability, with a mother as a primary carer, on the telephone, speaking English, and diagnosed >6 months ago. Population of interest N = 193.

Interventions

1. Community-based support programme over 15 months - trained network mother + child life specialist pairing. 2. Control group are given a contact number for an experienced mother. 7 home visit; twice weekly telephone calls; 3 special family events

Outcome measures

Children: a. personal adjustment and role skills b. depression c. anxiety d. self-perception. Mother: a. anxiety b. depression c. stressful life events

Main results

The experimental group's mean adjustment score increased over the intervention period while the control group's mean adjustment score decreased. Analysis of variance demonstrated that the intervention had a significant main effect on postintervention adjustment controlling for baseline scores (P =.01). Using a cutoff score indicating maladjustment, the percentage of experimental group children in the maladjustment range fell from 19% at baseline to 10% after the intervention; the percentage of control group children in the maladjustment range rose from 15% at baseline to 21% after the intervention. The effect of the intervention was more pronounced for children who had low physical self-esteem than for those who had moderate to high physical self-esteem at the beginning of the program.

Authors' conclusions

Modest positive effects of a family support intervention in promoting the adjustment of children with selective chronic health conditions. Including child life specialists in a community-based intervention may be especially salient for children with chronic illnesses who have low physical self-esteem. The intervention had a similar outcome for all diagnostic groups, suggesting that it could be effective for children with any chronic illness and implemented in a variety of pediatric settings.

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See also

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Keywords

Child; Child Health Services; non pharmacological intervention - psyco-soc-edu-org; training; Home; Organization;