

A parenting course to reduce behavioural difficulties and improve the quality of life for families of those diagnosed with fetal alcohol spectrum disorders

Submission date 30/07/2022	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
Registration date 27/09/2022	Overall study status Completed	<input checked="" type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
Last Edited 19/02/2025	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Individual participant data <input checked="" type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

Fetal alcohol spectrum disorder (FASD) is caused by drinking alcohol during pregnancy. Children with FASD have damage to the brain for the rest of their life. It makes it difficult to communicate, keep friendships, and stay calm and still, among other difficulties. They are more likely to be excluded from school. As grownups, they might suffer from mental ill-health, or get in trouble with the law. New research shows FASD is very common, affecting 2- 4% of children. This makes it more common than autism, but it is underdiagnosed. When a child gets diagnosed with FASD, the parents need help. A parenting course might help, but there is no course specifically for FASD. This makes it difficult for doctors to know what to recommend. Recently, the Department of Health and Social Care said we need “innovative approaches” to support those with FASD. The new National Institute for Health and Clinical Excellence (NICE) Quality Standard on FASD says each child should have a plan that “signposts to resources and services”. Our project fills these needs.

This research aims to test a new parenting course, called SPECIFIC. Experts including parents of people with FASD, charities and clinicians and academics helped us to develop SPECIFIC. We also trained nine families using SPECIFIC. These families helped us to make it better. Families will continue to be involved by helping us to run the project and analyse the data. The hope is that eventually the NHS and charities will be able to deliver the course to thousands of families. Firstly, a smaller test study needs to run called a feasibility test. This will tell us whether it is worth doing a bigger test, called a randomised control trial. This small-scale test will show whether it is easy to get parents to join and complete the programme and if it appears to improve the lives of families.

Who can participate?

Parents of children with FASD

What does the study involve?

SPECIFIC is a seven-week course where families meet online each week. There are two facilitators, one is a trainer and the other is an FASD-experienced parent. We will test SPECIFIC on ten groups of six families and compare findings with families that have not had the course. The families that have not had the course are called a 'control group'. After the course, we will measure the parents' stress levels and their parenting confidence. As soon as we have done the comparison, the control group will also get the training course.

What are the possible benefits and risks of participating?

There are possible benefits to participating because the programme is designed to improve the lives of children with FASD and their families, both in the short and long term. It is possible that by taking part in the programme a parent can learn more about the most effective ways to care for children with FASD. The possible risks relate to the fact that some of the issues discussed are potentially upsetting; however, the programme is designed to have a positive focus.

Where is the study run from?

University of Salford (United Kingdom)

When is the study starting and how long is it expected to run for?

July 2021 to October 2024

Who is funding the study?

1. National Institute for Health and Care Research Research for Patient Benefit (NIHR RfPB) programme (United Kingdom)
2. The Oglesby Charitable Trust (United Kingdom)

Who is the main contact?

1. Prof Penny Cook (Co-principal investigator) (United Kingdom)
p.a.cook@salford.ac.uk
2. Prof Raja Mukherjee (Co-principal investigator) (United Kingdom)

Contact information

Type(s)

Principal investigator

Contact name

Prof Penny Cook

ORCID ID

<https://orcid.org/0000-0001-6435-8050>

Contact details

School of Health and Society
University of Salford
Frederick Road
Salford
United Kingdom
M6 6PU
+44 (0)161 295 2804
p.a.cook@salford.ac.uk

Type(s)

Principal investigator

Contact name

Prof Raja Mukherjee

ORCID ID

<https://orcid.org/0000-0002-2171-928X>

Contact details

Consultant Psychiatrist
Clinical Lead Adult NDD& FASD, CCIO PLD
Foetal Alcohol Spectrum Disorder Service
Surrey and Borders Partnership NHS Foundation Trust
Gatton Place
St Matthew's Road
Redhill
United Kingdom
RH1 1TA
None provided
Raja.Mukherjee@sabp.nhs.uk

Additional identifiers**Clinical Trials Information System (CTIS)**

Nil known

Integrated Research Application System (IRAS)

319297

ClinicalTrials.gov (NCT)

Nil known

Protocol serial number

NIHR203536, IRAS 319297, CPMS 53960

Study information**Scientific Title**

Parenting course for parents of children with fetal alcohol spectrum disorders (FASD) versus waitlist: a randomised controlled feasibility study of the SPECIFiC (Salford Parents and carers' Education Course for Improvements in Fasd outcomes In Children) Programme

Acronym

SPECIFiC

Study objectives

Parenting interventions reduce behavioural difficulties and improve the quality of life for families of those diagnosed with FASD

Ethics approval required

Old ethics approval format

Ethics approval(s)

1. Approved 14/07/2022, University of Salford School of Health and Society Ethical Approval Panel (Salford Crescent, Salford, M5 4WT, United Kingdom; +44(0)161 295 4109; ethics@salford.ac.uk), ref: 6895
2. Approved 07/11/2022, North West – Greater Manchester (GM) East, (Research Ethics Committee, 3rd Floor, Barlow House, 4 Minshull Street, Manchester, M1 3DZ, United Kingdom; +44 (0)2071048009, +44 (0)2071048206, +44 (0)2071048199; gmeast.rec@hra.nhs.uk), ref: 22 /NW/0287

Study design

Multicentre interventional double-blind randomized controlled feasibility study

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Stress reduction in families diagnosed with fetal alcohol spectrum disorder

Interventions

Families will be randomised 1:1 into the intervention or control arm. The intervention arm is SPECIFIC, a seven-week course where families meet online each week for 2.5 hours per week. Families will be trained in groups of 6 families. There are two facilitators, one is a trainer and the other is an FASD-experienced parent. All materials and information in the intervention are contained in a manual. The primary outcome measure for efficacy (Parenting Stress Index, PSI) will be used to compare the SPECIFIC arm against treatment as usual at 16 weeks, after which the control arm will receive the intervention.

Intervention Type

Behavioural

Primary outcome(s)

Primary outcomes for this feasibility study:

1. Percentage of eligible parents invited who agree to participate measured using Clinic Registers at -4 and 0 weeks
2. Percentage of those participating who complete the study measured using intervention register at 0, 8 and 16 weeks

Primary efficacy outcome (proof-of-concept):

1. Parent stress measured using the Parenting Stress Index 4th edition Short Form (PSI-4-SF) at 0, 8 and 16 weeks

Key secondary outcome(s))

1. Children's behavioural difficulties measured using SDQ Strengths and Difficulties Questionnaire at 0, 8 and 16 weeks

2. Children's behavioural difficulties measured using ECBI Eyberg Child Behaviour Inventor at 0, 8 and 16 weeks
3. Parents' psychological wellbeing measured using CORE-OM The Clinical Outcomes in Routine Evaluation–Outcome Measure at 0, 8 and 16 weeks
4. Parenting self-efficacy measured using TOPSE Tool to measure Parenting Self-Efficacy at 0, 8 and 16 weeks
5. Parent's health-related quality of life measured using EQ-5D-5L Tool at 0, 8 and 16 weeks
6. Parent and Child health and social care service use measured using CSRI Client Service Receipt Inventory at 0, 8 and 16 weeks
7. Parent satisfaction ratings measured using the Session Evaluation Form at each session, i.e. at 1, 2, 3, 4, 5, 6 and 7 weeks
8. Parent knowledge measured using FASD Knowledge Questionnaire at 0, 8 and 16 weeks
8. Acceptability (qualitative) measured using qualitative interviews at 16 weeks (subsample)

Completion date

01/10/2024

Eligibility

Key inclusion criteria

For the index child:

1. Aged 5 to 12 years old (school years 1 to 7)
2. Diagnosis in line with internationally agreed criteria for FASD
3. Diagnosed within the previous 3 years

For parents:

1. Able to commit to the whole seven sessions
2. Willing to wait for intervention if required

Participant type(s)

Patient, Carer

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

5 years

Upper age limit

12 years

Sex

All

Total final enrolment

129

Key exclusion criteria

For parents:

1. Ever previously undergone specialist parenting training for FASD
2. Presence of acute safeguarding issues or concerns

Date of first enrolment

01/10/2022

Date of final enrolment

29/02/2024

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

FASD National Clinic

Gatton Place
St Matthews Road
Redhill
United Kingdom
RH1 1TA

Study participating centre

University of Salford Frederick Road Campus

University of Salford
Allerton Building
Frederick Road Campus
Salford
United Kingdom
M6 6PU

Study participating centre

FASD Hub Scotland

Adoption UK
Units 11 and 12
Vantage Business Park
Bloxham Road
Banbury
Banbury
United Kingdom
OX16 9UX

Sponsor information

Organisation

Surrey and Borders Partnership NHS Foundation Trust

ROR

<https://ror.org/00f83h470>

Funder(s)

Funder type

Government

Funder Name

The Oglesby Charitable Trust

Funder Name

Research for Patient Benefit Programme

Alternative Name(s)

NIHR Research for Patient Benefit Programme, Research for Patient Benefit (RfPB), The NIHR Research for Patient Benefit (RfPB), RfPB

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are/will be available upon reasonable request from the Chief Investigator Professor Penny A. Cook (p.a.cook@salford.ac.uk). Data will be quantitative (demographic and outcome variables, process measures) and qualitative (transcripts from interviews). Data will become available one year after the trial end

date. Consent from participants was obtained using the statement "I understand that my anonymised data will be kept indefinitely and archived at the University of Salford in order to make them available to other researchers".

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
HRA research summary	Participant information sheet		28/06/2023	No	No
Participant information sheet		11/11/2025	11/11/2025	No	Yes
Protocol file	version 4	01/04/2024	14/08/2024	No	No
Statistical Analysis Plan	version 2.0	20/11/2024	19/02/2025	No	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes