ISRCTN64237883 https://doi.org/10.1186/ISRCTN64237883

Boosting baby communication and play

Submission date
10/09/2021

Recruitment status
No longer recruiting

Registration date
13/09/2021

Overall study status
Completed

Last Edited
07/03/2024

Condition category
Mental and Behavioural Disorders

[X] Prospectively registered
[X] Protocol
[_] Statistical analysis plan
[X] Results
[_] Individual participant data

Plain English summary of protocol

Background and study aims
When a new mother experiences mental illness, this can have negative effects not just on herself, but also on her relationship with her child and on her child's future development and mental health. The NHS Long-Term plan states that increasing access to interventions to improve parent-infant relationships should be a priority. However, we have very little evidence on what parent-infant interventions actually work when implemented in real-world NHS services. Our team has recently evaluated the video feedback for positive parenting intervention (VIPP) in perinatal mental health services for women experiencing mental illness in the first year of their child's life. Mothers are videoed interacting with their babies, and given positive and non-judgemental feedback. We found potential benefits for mothers and children receiving VIPP, in how confident mothers felt and how they interacted with their children.
However, VIPP is currently designed for infants aged above 6 months. To help more women using perinatal mental health services, we have now adapted VIPP for younger babies and have also added tips on what strategies parents can use to feel calmer if they are feeling stressed while interacting with their child.
We now need to pilot the modified intervention with Mums using perinatal mental health services, to check it is feasible for clinicians to deliver, and to gain Mums' and clinicians' feedback. We will train clinicians in perinatal mental health services to deliver the modified intervention. We will evaluate how well perinatal mental health staff are able to deliver the intervention; mothers' attendance and feedback; changes in mothers' responses to their babies' communication, parenting-related stress, parental self-confidence and bond with their baby. We will assess these using questionnaires and videos of the mothers playing with their babies, as well as by carrying out feedback interviews with mothers and clinicians.

Who can participate?
Mothers currently under the care of a perinatal mental health service who have a child aged 2 months 0 days to 3 months 31 days old.

What does the study involve?
Step 1. We will ask mothers about their current and past mental health, their feelings about being a Mum, and their baby's development. We will film short clips of Mum and baby playing together.
Step 2. Mothers will then be offered six sessions of the video feedback intervention for positive parenting. The clinician will make film clips of Mum and baby playing together and then you will

watch them back with the clinician so that you can talk together about what your baby's behaviour means, their bond with you and what he/she is communicating.
Step 3. We will check in with the mothers again, to find out how they are doing in terms of their mental health, their feelings about being a Mum, and their baby's development. We will again film short clips of Mum and baby playing together. We will also ask mothers to give us feedback about their experiences of the intervention.

What are the possible benefits and risks of participating?
We are in the early stages of this research and therefore we cannot say with certainty that taking part will be of benefit. However, the Baby Communication and Play sessions have been used in research studies previously and parents have found them helpful. Afterwards, mothers will be able to download their own copy of the clips of baby and themselves playing together. The disadvantages of taking part are likely to be small. Mothers will need to put some time aside for the video feedback visits. Some people can find it embarrassing to watch clips of themselves and can start to feel self-conscious, judge themselves or worry that others will judge them. The professionals conducting the visits are specially trained to be aware of this and to help participants deal with these feelings.

Where is the study run from?
City University of London (UK).

When is the study starting and how long it is expected to run for?
April 2021 to May 2022.

Who is funding the study?
The study is funded by City University of London and Central & North West London NHS Foundation Trust (UK).

Who is the main contact?
The main contact is Kirsten Barnicot at City University of London.

Contact information

Type(s)
Scientific

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Public

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Additional identifiers

Clinical Trials Information System (CTIS)
Nil known

Integrated Research Application System (IRAS)
289896

ClinicalTrials.gov (NCT)
Nil known

Protocol serial number
IRAS 289896

Study information

Scientific Title
Video feedback for positive parenting in perinatal mental health services: Developing and piloting an optimised protocol

Acronym
BOOST-2

Study objectives
To evaluate the feasibility and acceptability of the adapted Video feedback intervention for Positive Parenting (VIPP), for mothers using perinatal mental health services and their 2 to 6 month old infants.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Approved 29/06/2021, East of England - Cambridge South Research Ethics Committee (The Old Chapel, Royal Standard Place, Nottingham, NG1 6FS, UK; no telephone number provided; cambridgesouth.rec@hra.nhs.uk), ref: 21/EE/0139

Study design
Multi-centre interventional feasibility case series

Primary study design
Interventional

Study type(s)
Treatment

Health condition(s) or problem(s) studied
Mothers experiencing moderate to severe perinatal mental health difficulties

Interventions
Video feedback intervention for positive parenting. A 7 session intervention in which mothers and their child are filmed playing together and given positive feedback on the interaction from the child's perspective, with the aim of enhancing maternal sensitivity and parent-child relationships. The intervention sessions are scheduled every 2 weeks and the intervention thus lasts on average 3 months. Research follow-up will be at 5 months post-baseline.

This is an uncontrolled case series; there is no control/ comparator intervention.

Intervention Type
Behavioural

Primary outcome(s)
Percentage of mothers initiating and completing the VIPP intervention measured using patient records at the end of the study

Key secondary outcome(s))
1. Percentage of mothers invited to participate who give informed consent to do so measured using patient records at the end of the study
2. Mother and clinician ratings of the therapeutic alliance measured using the Helping Alliance Scale during VIPP at month 5 post-baseline
3. Participants' own accounts of their experiences of the feasibility and acceptability of the intervention, assessed using qualitative interviews at month 5 post-baseline
4. Parental Stress Scale at month 5 post-baseline
5. Parent Expectations Survey at month 5 post-baseline
6. Mother Object Relations Scale – Short Form (MORS-SF) at month 5 post-baseline
7. Parental sensitivity measured using the Parent Infant Interaction Observation Scale at month 5 post-baseline
8. Difficulties in Emotion Regulation Scale at month 5 post-baseline

Completion date
30/05/2022

Eligibility

Key inclusion criteria

1. Are using community perinatal mental health services
2. Are a primary caregiver of a child aged 2 to 3 months
3. Are capable of giving informed consent
4. Are aged 16 to 65 years

Participant type(s)
Patient

Healthy volunteers allowed
No

Age group
Adult

Sex
Female

Key exclusion criteria
1. Families where a sibling or co-parent is participating in the trial
2. Families in which the eligible child has a clinical diagnosis of a learning difficulty, developmental disorder or sensory impairment.
3. Families in which the eligible parent has English language or learning difficulties that are sufficiently severe to prevent them completing study measures even with assistance.

Date of first enrolment
13/09/2021

Date of final enrolment
30/11/2021

Locations

Countries of recruitment
United Kingdom

England

Study participating centre
Central and North West London NHS Foundation Trust
350 Euston Road
Regent's Place
London
United Kingdom
NW1 3AX

Study participating centre

East London NHS Foundation Trust
9 Allie Street
London
United Kingdom
E1 8DE

Study participating centre
Oxleas NHS Foundation Trust
Pinewood House
Pinewood Place
Dartford
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DA2 7WG

Sponsor information

Organisation
City, University of London

ROR
https://ror.org/04489at23

Funder(s)

Funder type
Charity

Funder Name
Barts Charity

Alternative Name(s)

Funding Body Type
Private sector organisation

Funding Body Subtype
Trusts, charities, foundations (both public and private)

Location
United Kingdom

Funder Name
Central and North West London NHS Foundation Trust

Results and Publications

Individual participant data (IPD) sharing plan
The datasets generated during and/or analysed during the current study are available from the corresponding author on reasonable request. k.barnicot@imperial.ac.uk

IPD sharing plan summary
Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		05/03/2024	07/03/2024	Yes	No
HRA research summary			28/06/2023	No	No
Participant information sheet	Participant information sheet version 1.1	11/11/2025	11/11/2025	No	Yes
Protocol file		22/06/2021	13/09/2021	No	No