

Families First Edmonton

Submission date 26/02/2007	Recruitment status No longer recruiting	☐ Prospectively registered ☐ Protocol
Registration date 26/02/2007	Overall study status Completed	☐ Statistical analysis plan ☐ Results
Last Edited 16/11/2009	Condition category Other	☐ Individual participant data ☐ Record updated in last year

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

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Additional identifiers

Protocol serial number

MCT-75478

Study information

Scientific Title

Families first Edmonton: The comparative effects and expense of four models of augmenting services for low-income families

Acronym

FFE

Study objectives

Low-income families who receive primary health care (PRMHLTH) and/or Recreation Coordination (REC) will initially increase uptake of linkages to services, costs to service systems will decrease over time, and the physical and psychosocial health of family members will increase over time.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Health Research Ethics Board of University of Alberta, Edmonton, Alberta, Canada, approved on the 5th September 2006 (ref: B-030704)

Primary study design

Interventional

Study design

Single centre prevention, behavioural, and educational intervention type, four-armed randomised factorial trial with outcome assessor blinding

Study type(s)

Quality of life

Health condition(s) or problem(s) studied

Physical and psychosocial health

Interventions

This trial will test four service delivery models:

1. The Control Model (EXIST)
2. The Primary Health Care Model (PRMHLTH)
3. The Recreation Coordination Model (REC)
4. The Comprehensive Model (COMP)

These service delivery models and the practices associated with them are designed primarily to:

1. Build and sustain low-income family-initiated linkages to established government and community services, and
2. Reduce overall costs to health and social service sectors by increasing cost-effective use of preventive and health promotional services

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

Increased linkages between low-income families and established services in their communities.

Key secondary outcome(s)

1. Characteristics of linkages between families and services
2. Costs to service systems
3. Adult physical health
4. Adult psychosocial health
5. Child physical health
6. Child psychosocial health

Completion date

01/02/2007

Eligibility**Key inclusion criteria**

Participant families will:

1. Have received low-income assistance (Income Support [IS] or Alberta Child Health Benefit [ACHB]) continuously for over 12 months
2. Have a child or children between zero and 18 years of age, either sex
3. Reside in designated geographic areas that serves many low-income families, and
4. Be able to provide signed consent

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 Years

Sex

All

Key exclusion criteria

Potential study participants will be excluded:

1. If they refuse to give informed consent to be interviewed
2. If they are unable to read and write English and an appropriate translator is not available
3. If they have plans to move outside the regions, or
4. If they are unwilling to participate for the entire follow-up period

Date of first enrolment

01/11/2005

Date of final enrolment

01/02/2007

Locations

Countries of recruitment

Canada

Study participating centre

Health Sciences Council

Alberta

Canada

T6G 1K8

Sponsor information**Organisation**

University of Alberta (Canada)

ROR

<https://ror.org/0160cpw27>

Funder(s)**Funder type**

Research organisation

Funder Name

Canadian Institutes of Health Research (CIHR) (Canada) - <http://www.cihr-irsc.gc.ca> (ref: MCT-75478)

Funder Name

Alberta Heritage Foundation for Medical Research (AHFMR) (Canada)

Alternative Name(s)

AHFMR

Funding Body Type

Government organisation

Funding Body Subtype

Local government

Location

Canada

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration