ISRCTN74447767 https://doi.org/10.1186/ISRCTN74447767

Mum skills: the effect of parenting training in mothers with a borderline personality disorder

Submission date
08/03/2022

Recruitment status
No longer recruiting

Registration date
10/03/2022

Overall study status
Completed

Last Edited
05/05/2026

Condition category
Mental and Behavioural Disorders

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

Plain English summary of protocol

Background and study aims
Borderline personality disorder (BPD) is a serious mental illness that centres on the inability to manage emotions effectively. The aim of this study is to assess the effectiveness of a Dutch version of the parenting training based on dialectical behaviour therapy (DBT) on parenting behaviour and parental stress in mothers with BPD with children aged 0-8 years. It is thought that mothers who receive the training will improve their parenting behaviour and the training will reduce parental stress experienced by these mothers. Clinical experience suggests that discussing motherhood, openness about the parenting problems these mothers face and providing parenting strategies often reduces parental stress and improves mother-child interaction after treatment.

Who can participate?
Mothers aged over 18 years with a full BPD diagnosis with at least one child aged under 8 years and under treatment at a mental health care centre in the north of the Netherlands

What does the study involve?
The A-phase is the baseline period during which the researchers administer idiosyncratic assessments (15 questions) picked from two questionnaires measuring parental stress and parental behaviour, and the mothers will only receive treatment at usual (TAU). Baseline measurements will be completed to evaluate changes in parenting behaviour and parental stress before the training. The B-phase is the treatment period in which the mothers undergo 12 weekly sessions of 150 minutes per session and six individual coaching sessions of 45 minutes per session. The participants will receive idiosyncratic assessments twice a week during the 12 weeks of treatment. Participants will be assessed before treatment, halfway through treatment, after treatment and at 2 months follow-up. In total these assessments will take 60 minutes. For each participant subscales of the parental stress and parental behaviour questionnaires will be measured two times per week, during baseline and between training sessions, that is 5 minutes for 15-19 weeks. This will take about 75-95 minutes. At the end of every group session the participants fill in a very brief, four-question questionnaire to assess group atmosphere. As part of the parenting skill training participants will need to fill in diary cards weekly (as during regular DBT). That will take 15 minutes per week for 15-19 weeks (225-285 minutes).

What are the possible benefits and risks of participating?
The training may lead to improved parenting behaviour and reduced parental stress. The extra burden for all participants is filling out questionnaires for a number of weeks. Because the diary card specifically provides insight into the urges for and acts of impulsive behaviour, the mothers can be confronted by their possible aggressive impulses towards their child.

Where is the study run from?
GGZ Noord-Holland-Noord (Netherlands)

When is the study starting and how long is it expected to run for?
June 2020 to September 2021

Who is funding the study?
GGZ Noord-Holland-Noord (Netherlands)

Who is the main contact?
Daan Vigeveno
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Contact information

Type(s)
Principal investigator

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Additional identifiers

Protocol serial number
ID number 123456

Study information

Scientific Title
Effectiveness of parenting training in mothers with a borderline personality disorder: a multiple baseline design

Study objectives
The hypothesis is that a dialectical behaviour therapy (DBT) based parenting training will be effective: mothers who receive the training will improve their parenting behaviour and the training will reduce parental stress experienced by these mothers. Clinical experience suggests

that discussing motherhood, openness about the parenting problems these mothers face and providing parenting strategies often reduces parental stress and improves mother-child interaction after treatment.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Approved 04/12/2020, the VU Medical Centre in Amsterdam (Medisch etische toetsing commissie Amsterdam UMC, De Boelelaan 1117, 1118, 1081 HV Amsterdam; +31 (0)20 44 45585; metc@vumc.nl), ref: NL74201.029.20

Primary study design
Interventional

Study design
Randomized controlled trial

Study type(s)
Treatment

Health condition(s) or problem(s) studied
Borderline personality disorder

Interventions
The DBT-based parenting training evaluated in this study is the Dutch version of the training for mothers with BPD developed by Renneberg and Rosenbach (2016). The main goal is to address the specific needs of the BPD mothers. The training focusses on BPD problems concerning parenting, interaction with the child and general knowledge about parenting strategies. The parenting training consists of 12 weekly (150 minutes) group sessions as well as six biweekly individual sessions.

Intervention Type
Behavioural

Primary outcome(s)
1. Parenting behaviour measured using the Dutch version of the Alabama Parenting Questionnaire (APQ) at T=0 before baseline, T=1 start of treatment, T=2 mid-treatment, T=3 end of treatment and T=4 follow-up
2. Parental stress measured using the Dutch Parental Stress Index-child report (Nijmeegse Ouderlijke Stress Index Kinderen; NOSI-K) at T=0 before baseline, T=1 start of treatment, T=2 mid-treatment, T=3, end of treatment and T=4 follow-up
3. Idiosyncratic outcome measured using a short 15-item idiosyncratic assessment (IA) biweekly during the baseline and treatment phase (T=0 to T=3), biweekly during the baseline and treatment phase

Key secondary outcome(s)
Potential confounding factor: group atmosphere measured using the Group Session Rating Scale (GSRS) weekly at Weeks 1 -12 during treatment

Completion date

25/09/2021

Eligibility

Key inclusion criteria
1. A full diagnosis of BPD: meeting Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM-5) criteria for BPD measured by a SCID-P-5, a structured clinical interview (Arntz et al., 2017)
2. Aged above 18 years
3. The primary caregiver to at least one child under the age of 8 years at the start of the group; whereby the acute welfare of the child was not endangered
4. Dutch speaking; able to comprehend Dutch at a level sufficient to complete self-report instruments, the assignments, the group training and individual sessions
5. Willing and able to commit to attending a 2-hour group once a week for 12 weeks, all measurements and 45 minutes individual session every other week

Participant type(s)
Patient

Healthy volunteers allowed
No

Age group
Mixed

Lower age limit
18 Years

Upper age limit
120 Years

Sex
Female

Total final enrolment
10

Key exclusion criteria
1. Lifetime psychosis or bipolar disorder type I
2. Insufficient cognitive capacity to comprehend the topics being discussed; screened by the SCIL (screener for intelligence and learning difficulties) with a cut-off score of 19 (Kaal et al. 2015)
3. Significant substance abuse that would have an impact on group functioning; as per clinical judgement following discussion with the research team
4. Start of new medication within 3 months before the start of this study

Participants will not be excluded due to concurrent treatment (pharmacological or non-pharmacological)

Date of first enrolment
04/01/2021

Date of final enrolment
22/02/2021

Locations

Countries of recruitment
Netherlands

Study participating centre
GGZ-Noord Holland Noord
Stationsplein 138
Heerhugowaard
Netherlands
1703 WC

Sponsor information

Organisation
GGZ Noord-Holland-Noord

ROR
https://ror.org/00b3xjw51

Funder(s)

Funder type
Hospital/treatment centre

Funder Name
GGZ Noord-Holland-Noord

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary
Data sharing statement to be made available at a later date

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		11/12/2024	05/05/2026	Yes	No