

New Culture, New Language: Moving SNAP to the Netherlands

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Getting SNAP to the Netherlands

- Why SNAP in the Netherlands?
- Translation of the intervention and instruments
- Embedding:
 - SNAP in the community
 - SNAP in the organisation
 - SNAP in research
- Preliminary results
- Moving on...

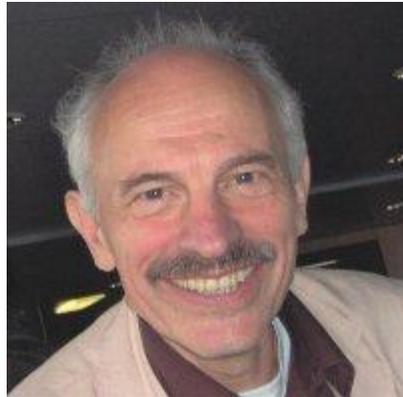
Why SNAP in the Netherlands?

- Although many evidence based programs for children with behavior problems are available in The Netherlands,
 - no multisystemic program for very high risk children
 - Non-Western children are underserved
 - High risk families with young children are underserved



Why SNAP in The Netherlands

- The first ambassadors



Translation of intervention and instruments

- EARLs
- SNAP manuals and materials
- Steps (all were essential to come up with a good translation):
 - First translation (who is a clinician)
 - Check by co-translator (who is a clinician)
 - Check by Monique from the Canadian SNAP team
 - Check during mock sessions
 - Check after pilot



Embedding SNAP in the community

Community partner meeting in Almere (January 2012)

- Police were our champions
- Other care providing organizations were very suspicious
- Municipality was reluctant but interested

➡ challenge: we got the kids that were suspended from primary school



Embedding SNAP in the organization

- Selection and training of staff
- Training in English
- Mock sessions in Dutch, sent to Canada to be reviewed by Monique
- SNAP pilot project team
 - Director of the Almere region
 - Treatment director of the Almere region
 - Dutch SNAP supervisor
 - Project leader
 - Head of research and development team



Embedding in research

- EARL research on files of 200 children with first police arrest
- One SNAP parttime researcher
- Head of research department closely involved
- Close connections to universities: Maastricht University, VU medical center

Results Dutch EARL-20B (N=200 first time arrestees)

- good interrater reliability:
single measure ICC = .74 total score; .79 final risk judgment
- predictive validity:

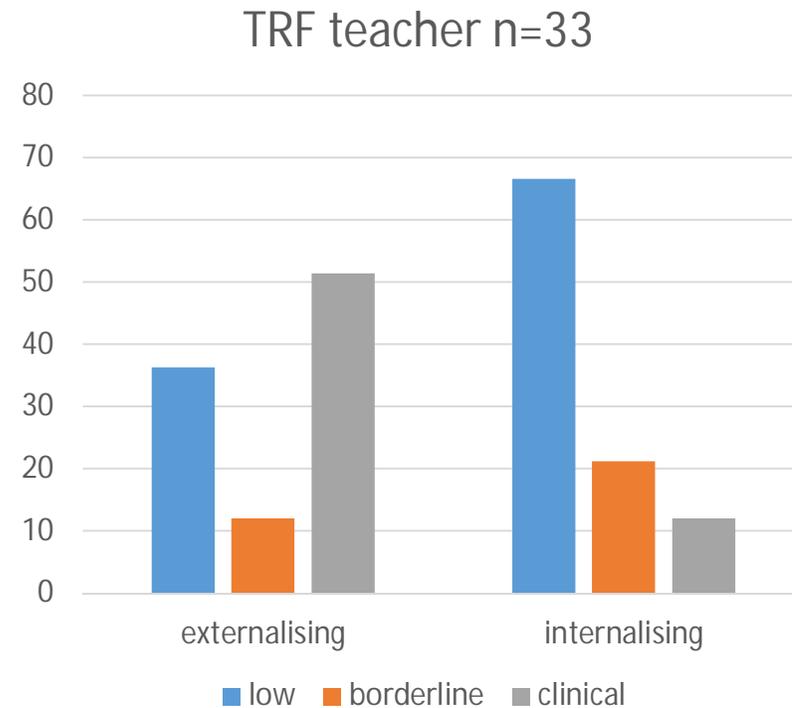
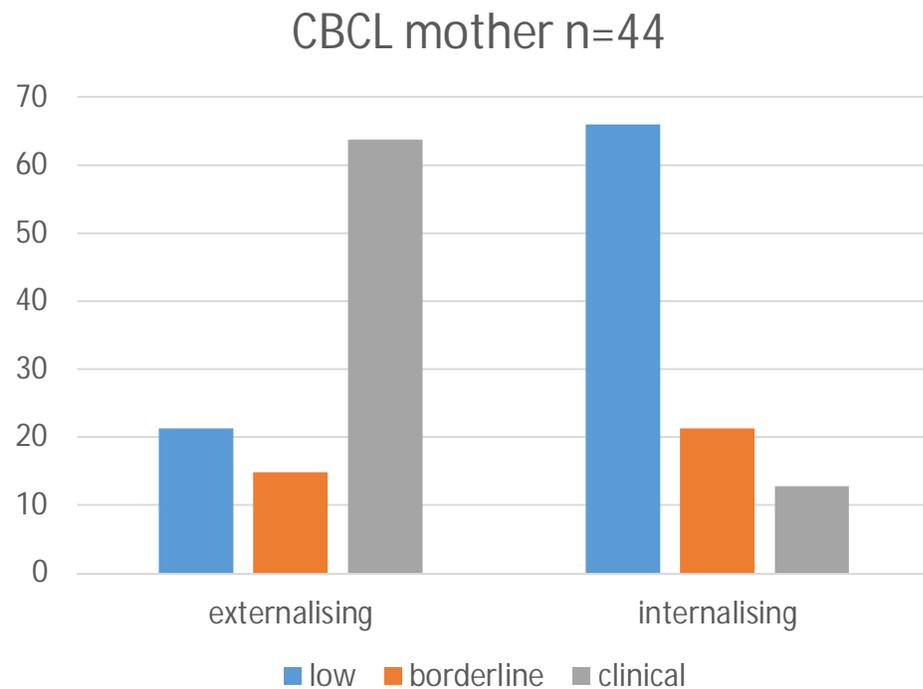
	EARL-20B total score
	AUC (SE)
Self/parent report	
violence T1	.64 (.04) ^{***}
violence T2	.68 (.05) ^{***}
theft T1	.61 (.05) ^{**}
theft T2	.73 (.04) ^{***}
Disruptive BD T2	.78 (.05) ^{***}
Police record	
Any offense T2	.60 (.04) ^{**}
Violent offense T2	.59 (.05) [*]

T1= 1 year after first arrest

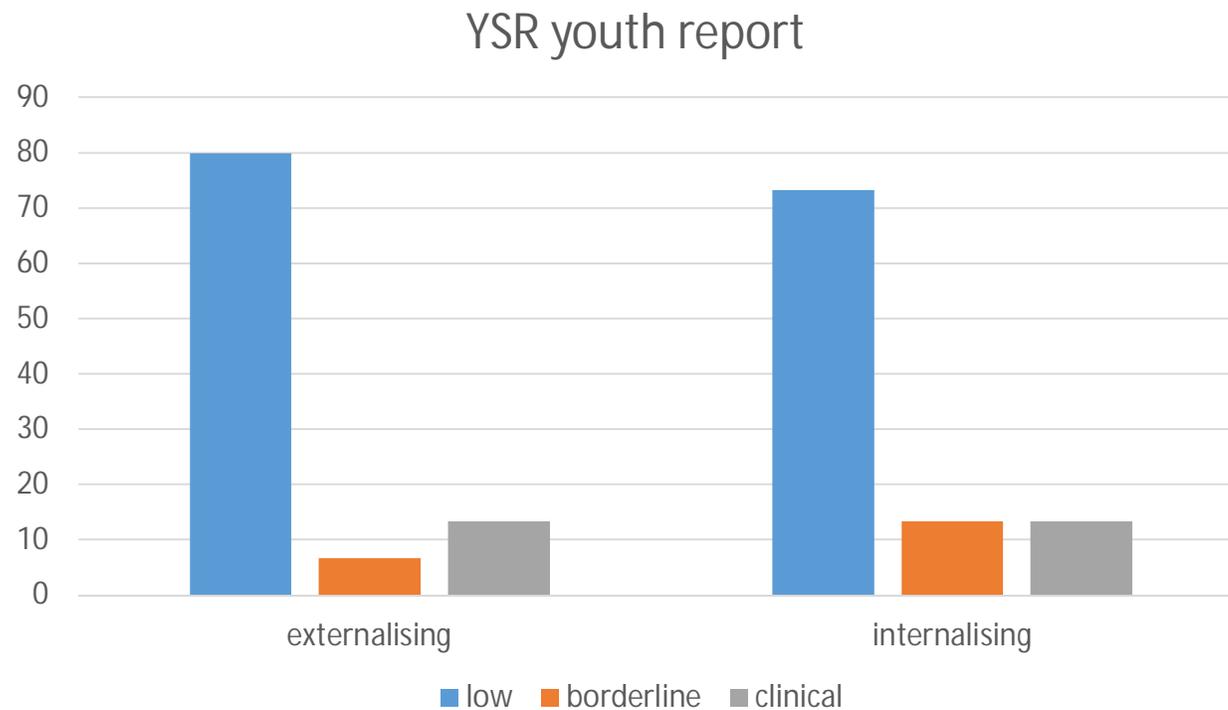
T2= 2 years after first arrest

Preliminary results on SNAP effectiveness (baseline)

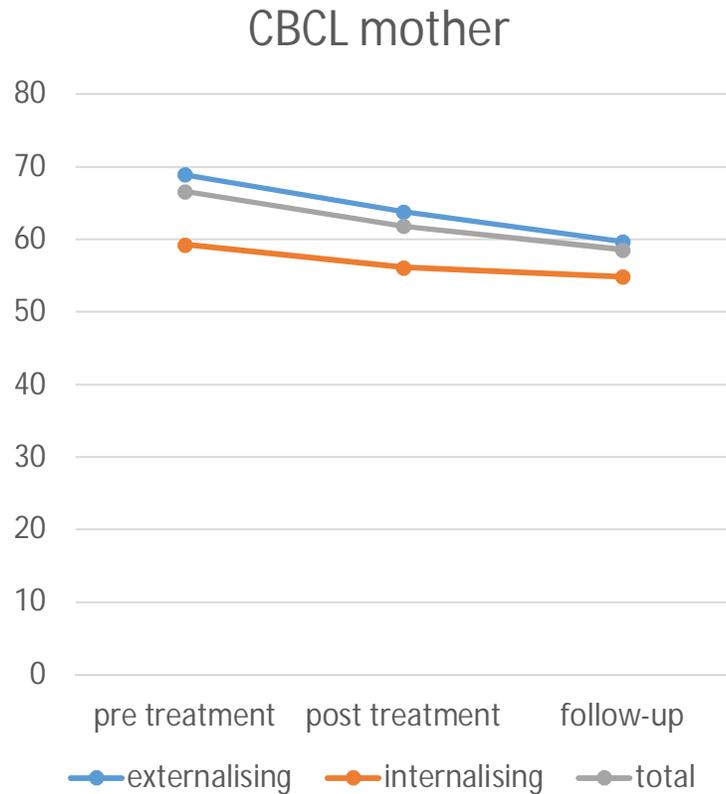
- 9 boy groups (5 groups 6-9 years, 4 groups 9-12 years)
- 78% of Non-Western origin



Preliminary results on SNAP effectiveness (baseline)



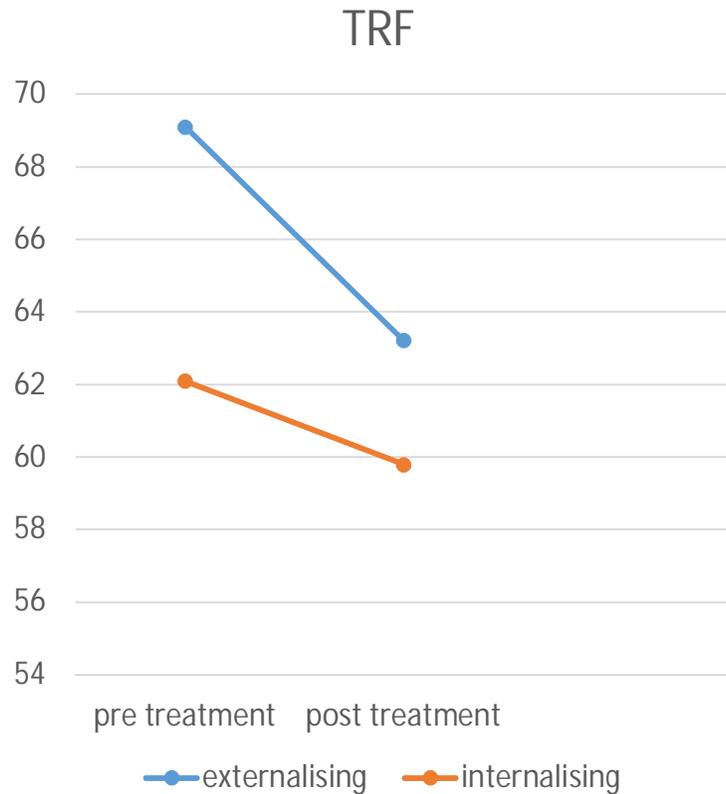
Preliminary results (mother report)



Cohen's <i>d</i>	Pre - post	Pre - follow up
CBCL	n= 42	n=19
Externalising	.48	.82
Internalising	.32	.59
Total score	.48	.90

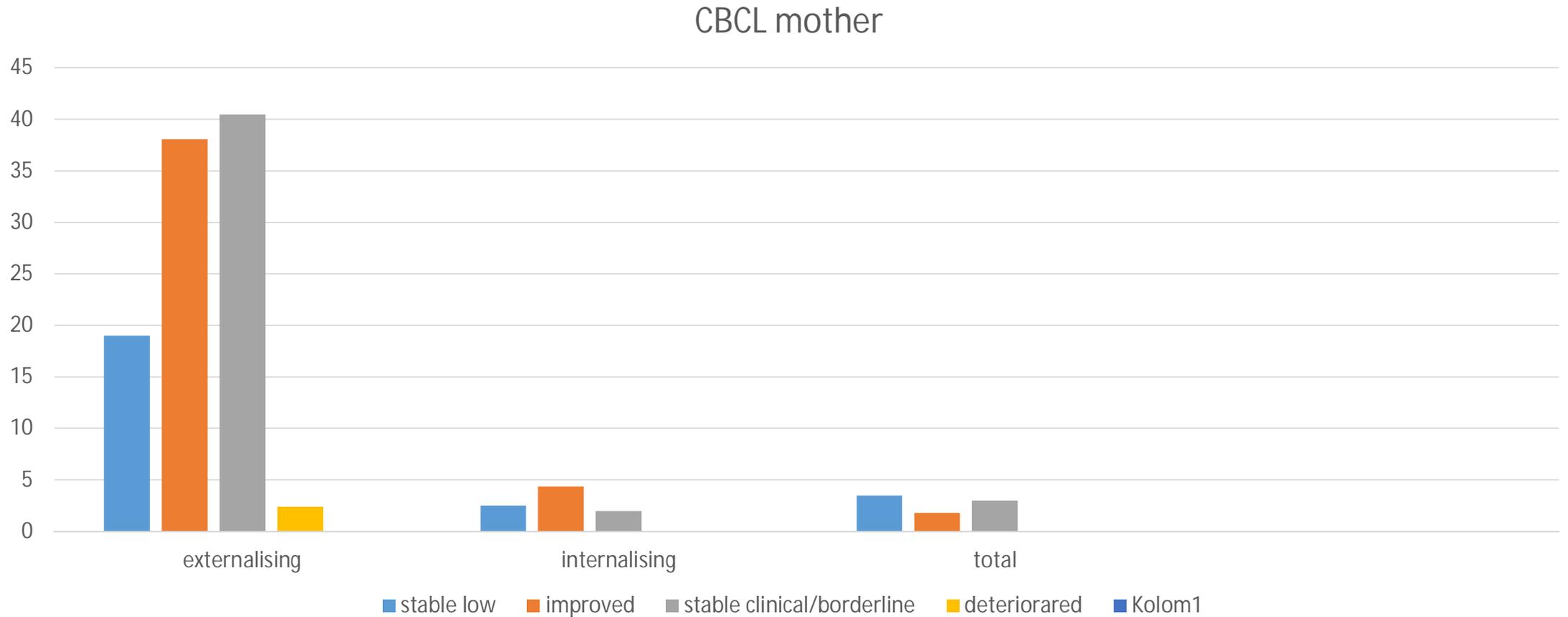
Follow-up= 6 months after post treatment

Preliminary results (teacher report)



Cohen's <i>d</i>	Pre - post
TRF	n= 18
Externalising	.63
Internalising	.30
Total score	.58

Preliminary results: Clinical improvement



Moving on....

- SNAP in 3 more regions in The Netherlands (since 2015)
- SNAP currently being reviewed by Dutch database on effective interventions
- Starting first girls group in September 2015
- Starting with peer co-trainers
- New innovative research plans
- Experimenting with joint Canadian-Dutch training



Lessons learned

- Take your time and test your translations
- Listen to the advice of the CDI team (we made all the mistakes they warned us about in the first group)
- Have community/stakeholder meetings and look for champions in your service area
- Include research from the beginning
- Spend time on communication / networking at all levels (sister organizations, community, own organization, government, funding funding agencies)