

psychologist and peer support of other families were the most appreciated components of CHIP-Family. On other outcome measures, results were not significant. Further research is needed.

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Reply



To the Editor:

We congratulate van der Mheen et al for their publication describing the results of a randomized controlled trial evaluating the Congenital Heart Disease Intervention Program (CHIP)-Family.¹ As noted in their Letter to the Editor, CHIP-Family intervention components map onto several themes identified in our report. Specifically, parents in our study expressed the need for psychosocial interventions that prepare parents for medical and neurodevelopmental challenges associated with congenital heart disease and promote parenting skills and facilitation of social support. The parents in our study also expressed the need for several aspects of program structure that were not components of the CHIP-Family intervention, namely, psychosocial interventions delivered during hospitalization and interventions delivered over multiple, brief sessions. As the CHIP-Family intervention did not significantly impact parent or child outcomes in the randomized controlled trial,¹ we look forward to future studies on this and other interventions to address parent and family needs. We agree that additional research is needed in this area and are eager to continue working toward the shared goal of supporting healthy psychosocial functioning for children with congenital heart disease and their families.

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