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LEAD PARTNER:

Public Health Agency, Northern Ireland

PROJECT PARTNERS

Health Research Board, Ireland

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SPECIAL EU PROGRAMMES BODY

Project Case Study: CHITIN Project - Healthy Habits in Pregnancy and Beyond (HHIPBe) Trial

The Cross-border Healthcare Intervention Trials In Ireland Network (CHITIN) is a unique partnership between the Public Health Agency in Northern Ireland and the Health Research Board in Ireland, who are working together to deliver 11 Healthcare Intervention Trials (HITs). The HITs will help prevent and cure illness and promote improved health and well-being. The HHIPBe project, led by Queen's University Belfast, is just one of such interventions: a feasibility study to test whether it is possible to give women who have overweight or obesity at the start of pregnancy, a brief intervention that encourages them to develop positive food and physical activity habits and gain a healthy amount of weight during pregnancy.

Currently there is very limited support available to pregnant women with a high body mass index (BMI) to help them to manage their weight. The HHIPBe trial is based on a previous leaflet intervention called the '10 Top Tips for a Healthy Weight (10TT)', which used habit formation theory to facilitate behaviour change. In 10TT, participants were advised to follow ten healthy eating and physical activity tips, and to monitor their progress in a logbook, until following the tips became second nature i.e. habits'. The



HHIPBe trial aims to test the feasibility and acceptability of delivering a refined version of the 10TT intervention to pregnant women with a body mass index (BMI) between 25 and <38 kg/m² during routine antenatal care in Northern Ireland and Ireland.

The first two phases of the study have been completed; with phase one conducting interviews at the four partner sites (Our Lady of Lourdes Hospital, Drogheda; Sligo University Hospital; Altnagelvin Maternity Unit, Derry-Londonderry; and Royal Jubilee Maternity Hospital, Belfast) to gain an understanding of the antenatal care pathways, cross-border differences and data collection procedures; and phase two seeing refinement and testing of the 10TT intervention to make it suitable for pregnant women.

Phase three will involve conducting a feasibility randomised controlled trial to examine the possibility of delivering the HHIPBe intervention within routine antenatal care pathways at the four partner sites. This will involve the recruitment of 20 women at each of the four sites (80 women in total). Participants will be recruited at an early stage of their pregnancy (10-14 weeks) and will be randomised to either the HHIPBe intervention group (receiving a 15-20 minute intervention delivered by a midwife/researcher and then supported by a leaflet, logbook and app) or the control group (receiving routine antenatal care). The women will be followed up throughout pregnancy, with data collection points at baseline, 36 weeks and 6-8 weeks after birth. Collected data will include: weight; height; eating behaviours; physical activity behaviours; and health information.