

# Healthy Pregnancy 4 All-3

Gepubliceerd: 29-01-2020 Laatste bijgewerkt: 13-12-2022

Knowledge generated by this study can contribute to the development of an approach to perinatal health inequities that can be implemented in all municipalities in the Netherlands, regardless of their size, location, and previous experience with...

<b>Ethische beoordeling</b>	Niet van toepassing
<b>Status</b>	Werving gestopt
<b>Type aandoening</b>	-
<b>Onderzoekstype</b>	Observationeel onderzoek, zonder invasieve metingen

## Samenvatting

### ID

NL-OMON20063

### Bron

NTR

### Verkorte titel

HP4All-3

### Aandoening

Perinatal health inequities, adverse perinatal health outcomes

## Ondersteuning

**Primaire sponsor:** The research team has received funding from the Ministry of Health, Welfare and Sports in order to perform the Healthy Pregnancy 4 All-3 study. The sponsor has no role in the study design, data collection process and analysis, decision to publish, or preparation of a manuscript.

**Overige ondersteuning:** The research team has received funding from the Ministry of Health, Welfare and Sports in order to perform the Healthy Pregnancy 4 All-3 study. The sponsor has no role in the study design, data collection process and analysis, decision to publish, or preparation of a manuscript.

## Onderzoeksproduct en/of interventie

# **Uitkomstmaten**

## **Primaire uitkomstmaten**

The primary outcome is the extent to which social obstetrics is integrated into municipal policy plans/programs to address health inequities

## **Toelichting onderzoek**

### **Achtergrond van het onderzoek**

For this study we apply a multiple case study design, in which we conduct action oriented research in 6 Dutch municipalities. We aim to highlight differences and similarities in municipal approaches to health inequalities, as well as existing developments to implement social obstetrics, while taking background characteristics, such as size and location of the municipality into account. The commonality that allows for comparison of the participating municipalities are the relatively poor perinatal health outcomes. Elements of action research that we apply are individual interviews and interactive group sessions with various relevant stakeholders from the medical sector, social sector, public health sector, and the municipal government. With this approach we aim to investigate which transition in institutional structures, culture, and practices is needed to enable the integration of perinatal health into municipal approaches and policies concerning health inequities. Knowledge generated by this study can contribute to the development of an approach to perinatal health inequities that can be implemented in all municipalities in the Netherlands, regardless of their size, location, and previous experience with addressing perinatal health inequities.

### **Doel van het onderzoek**

Knowledge generated by this study can contribute to the development of an approach to perinatal health inequities that can be implemented in all municipalities in the Netherlands, regardless of their size, location, and previous experience with addressing perinatal health inequities.

### **Onderzoeksopzet**

Jan 2018-Dec 2018: identification and selection of the six participating municipalities  
Jan 2019-Dec 2019: interviews and interactive group sessions.  
Jan 2020-Dec 2020: preparation of action-agendas for the participating municipalities, administration of the questionnaire and organising a closing symposium

### **Onderzoeksproduct en/of interventie**

In each participating municipality we will conduct multiple interviews with key stakeholders

involved in social obstetrics. By the means of these interviews, we will gather information about what is currently being done within and across different sectors to reduce perinatal health inequities within the participating municipalities. After completion of the interviews, we will organise two successive interactive group sessions within each municipality. During these group sessions, participants collectively go through a participatory process of 1) problem structuring, 2) envisioning, 3) agenda-building, and 4) developing a portfolio of action-oriented experiments. After the completion of the two group sessions, the research team draws up a report for each of the six participating municipalities, in which relevant insights from the baseline measurement, the interviews, the group sessions, and the action-agenda will be summarised. Additionally, a questionnaire will be administered approximately one year after completion of the group sessions, in order to provide insight into (1) the actions taken in the period after the formation of the action-agenda, (2) the extent to which sustainable cross-sectoral collaborations are built, and (3) the extent to which perinatal health has been integrated into local approaches aimed at addressing health inequities. Finally, at the end of the HP4All-3 study period a symposium will be organised in which the research team will share their key findings of the HP4All-3 research program with key stakeholders involved in social obstetrics within the participating municipalities.

## Contactpersonen

### Publiek

Erasmus MC  
Leonie Daalderop

0031107031545

### Wetenschappelijk

Erasmus MC  
Leonie Daalderop

0031107031545

## Deelname eisen

### Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Action research is an intensive and time-consuming process. Given the capacity of our research team, we were able to select six Dutch municipalities as cases for our comparative

research. Participating municipalities will be selected based on an extensive baseline measurement that will be carried out among the 156 municipalities with the highest degree of deprived neighbourhoods out of all 355 Dutch municipalities. We hypothesized that our research would have the highest impact in municipalities with a high incidence of adverse perinatal health outcomes, a relatively large proportion of inhabitants with a low SES, and a high proportion of children living in families on welfare. Therefore, we will first select municipalities that belong to the highest quintile regarding the incidence of preterm birth and/or SGA and the lowest quintile regarding municipal SES and children living in families on welfare. In the second step of the selection process of participating municipalities, we will select 6 municipalities based on their size, geographical location in the Netherlands, and the extent to which they are already addressing perinatal health inequities.

## **Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)**

Not applicable

## **Onderzoeksopzet**

### **Opzet**

Type:	Observationeel onderzoek, zonder invasieve metingen
Onderzoeksmodel:	Anders
Toewijzing:	N.v.t. / één studie arm
Blinding:	Open / niet geblindeerd
Controle:	N.v.t. / onbekend

### **Deelname**

Nederland	
Status:	Werving gestopt
(Verwachte) startdatum:	01-01-2018
Aantal proefpersonen:	6
Type:	Werkelijke startdatum

## **Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)**

**Wordt de data na het onderzoek gedeeld:** Nog niet bepaald

### **Toelichting**

Not applicable

## Ethische beoordeling

Niet van toepassing

Soort:

Niet van toepassing

## Registraties

### Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

### Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

### In overige registers

Register	ID
----------	----

NTR-new	NL8344
---------	--------

Ander register	No ethical approval was required for this study, as we did not involve invasive procedures or patient data in our research. : Not applicable
----------------	--

## Resultaten

### Samenvatting resultaten

Not applicable