



This is a repository copy of *368 CFHealthHub: development and evaluation of videos incorporating peer description of successful self-management with inhaled therapies in adults with CF used to build self-efficacy to support self-care within the CFHealthHub complex intervention.*

White Rose Research Online URL for this paper:

<https://eprints.whiterose.ac.uk/120717/>

Version: Accepted Version

Proceedings Paper:

Kirkpatrick, S., Arden, M., Beever, D.A. orcid.org/0000-0001-9063-3677 et al. (16 more authors) (2017) 368 CFHealthHub: development and evaluation of videos incorporating peer description of successful self-management with inhaled therapies in adults with CF used to build self-efficacy to support self-care within the CFHealthHub complex intervention. In: Journal of Cystic Fibrosis. European Cystic Fibrosis Conference, 07-10 Jun 2017, Seville, Spain. Elsevier , S155-S156.

[https://doi.org/10.1016/S1569-1993\(17\)30699-9](https://doi.org/10.1016/S1569-1993(17)30699-9)

Article available under the terms of the CC-BY-NC-ND licence (<https://creativecommons.org/licenses/by-nc-nd/4.0/>).

Reuse

This article is distributed under the terms of the Creative Commons Attribution-NonCommercial-NoDerivs (CC BY-NC-ND) licence. This licence only allows you to download this work and share it with others as long as you credit the authors, but you can't change the article in any way or use it commercially. More information and the full terms of the licence here: <https://creativecommons.org/licenses/>

Takedown

If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing eprints@whiterose.ac.uk including the URL of the record and the reason for the withdrawal request.



eprints@whiterose.ac.uk
<https://eprints.whiterose.ac.uk/>

CFHealthHub: Development and evaluation of videos incorporating peer description of successful self-management with inhaled therapies in adults with CF used to build self-efficacy to support self-care within the CFHealthHub complex intervention

S. Kirkpatrick¹, R Sanders¹, S Drabble², H Cantrill³, C Maguire³, M Hutchings⁴, A Gates⁵, W Flight⁵, C Elston⁶, A Horsley⁷, R McVean⁷, H Langman⁷, S Johnson⁷, T Daniels⁸, M Wildman⁴, S Ryan¹, for the CFHealthHub group

¹University of Oxford, Nuffield Department of Primary Care Health Sciences, Oxford, United Kingdom, ²University of Sheffield, School of Health and Related Research (SchARR), Sheffield, United Kingdom, ³University of Sheffield, Clinical Trials Research Unit, Sheffield, United Kingdom, ⁴Sheffield Teaching Hospitals NHS Foundation Trust, Sheffield, United Kingdom, ⁵Oxford University Hospitals NHS Foundation Trust, Oxford, United Kingdom, ⁶King's College Hospital NHS Foundation Trust, London, United Kingdom, ⁷University Hospital of South Manchester NHS Foundation Trust, Manchester, United Kingdom, ⁸York Teaching Hospital NHS Foundation Trust, York, United Kingdom

Objectives: CFHealthHub (CFHH) is a complex intervention to help people with cystic fibrosis (PWCF) master self-care. Self-efficacy is an important determinant of behaviour change and peer modelling of success can increase self-efficacy.

Methods: We recruited adult PWCF from five UK CF units. Those post lung transplant, on the active transplant list or in the palliative phase of disease were excluded. Participants were purposively sampled based on objectively-measured adherence; lung function and socio-demographic characteristics. Video interviews were conducted in participants' homes by the Health Experiences Research Group from the University of Oxford. Semi-structured interviews explored patients' experience of CF and barriers and facilitators of nebuliser adherence. Interviews were analysed thematically using NVivo 10, within the COM-B model and then reviewed to select video clips for inclusion on CFHH with participant consent.

Results: Fourteen interviews were conducted between October 15 and August 16. PWCF described experiences of using inhaled therapy, motivations to improve adherence, and strategies for mastery. Initial qualitative research conducted in the CFHealthHub pilot suggested that overall the videos were well received. Some PWCF shown videos to support self-efficacy in the pilot RCT had concerns that seeing videos of PWCF who were healthier might make them reflect negatively on their comparative status and videos of PWCF who were less healthy might create anxieties about future health decline.

Conclusion: We have developed 'talking heads' videos to support behaviour change as part of a complex intervention. Some but not all PWCF found the videos helpful. It is important to sensitively support choice in the resources provided to PWCF aiming to increase self-efficacy.