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One year results of a tailored behaviour change programme in highly educated adults: a randomised controlled trial

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Purpose: Little is known about the adequate intervention dose of interventions to change multiple risk behaviours for cardiovascular disease. The aims of our study were to examine the effects and the doseresponse effects of a tailored behaviour change programme on diet and physical activity. Methods: 314 highly educated adults were allocated at random to intervention and usual care conditions. Both conditions involved medical interventions following the guidelines. The participants receiving the intervention had access to a website with tailored feedback, group sessions and individual coaching. For the latter, they could freely determine the dose (frequency and duration) and the delivery mode (e-mail, telephone, faceto-face). Repeated measures analysis of variances were used to examine the differences between the study groups. Linear modelling was used to examine the dose-response effects for diet and physical activity. Results: Of the participants, 236 completed the questionnaires at baseline and after one year. Both study groups had a lower fat intake (p<.05) and a higher level of physical activity (p<.001). No significant differences between the study groups were found. For diet, frequent telephone coaching should be combined with frequent face-to-face sessions to reduce the fat intake (p<.001). Intensive telephone coaching should be supplemented with frequent e-mails to increase physical activity (p<.05). Conclusions: No differences were found between the intervention and usual care conditions. However, significant dose-response effects were found for the intervention, independent of baseline motivation. These results emphasize the need to determine the adequate intervention dose and delivery mode to change behaviour.

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P1 T2.4

Is OptimaHL 60plus an effective tool to improve the communication between health professionals and the target group in relation to physical activity and nutritional behaviour?

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Purpose: OptimaHL 60plus is a counselling aid for the elderly. It aims to improve the nutritional and physical activity behaviour, maintenance and enhancement of the quality of life, and the autonomy of the elderly with special attention to people with migration background and to those in low socioeconomic districts. Special emphasis is placed on the question how a health programme can support the communication between health professionals and the elderly. With the help of OptimaHL 60plus the communication between elderly and health professionals should be improved and facilitated, as well as, tangible and relevant impulses for conversation are introduced. Methods: The acceptance of the counseling aid is measured after an intervention phase of 3 months and six months later. Telephone interviews are conducted with health professionals and face to face interviews are realised with the elderly. The acceptance of the instrument is measured by 4 criteria. Results: First results indicate that the elderly do not have any problems handling the instrument. Most of the target group agreed that the counselling aid supports reminding them what they should eat or how active to be per day. General practitioners mostly consider OptimaHL 60plus as an effective tool to get a first impression of the health behaviour of the elderly. Additionally, the instrument helps to focus and to identify challenges and resources of the target group. Conclusions: OptimaHL 60plus will contribute to the communication between health professionals and the target group in relation to physical activity and nutritional behaviour.