Behavourial insights for intervention design

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14:40 Welcome & Introductions

14:45 Background – theory & NHS Health Check example

14.50 **Task 1:**
Identify behaviours within the NHS Health Check journey

15.05 **Task 2:**
Identify behaviour drivers using the COM-B model

15.20 **Task 3:**
Identify intervention functions that could effectively change behaviour

15.30 Conclusions & questions
A Behavioural Approach

Stage 1: Understanding the behaviour
1. Define the problem in behavioural terms
2. Select the target behaviour
3. Specify the target behaviour
4. Identify what needs to change

Stage 2: Identify Intervention Options
Identify
5. Intervention functions
6. Policy categories

Stage 3: Identify content & implementation options
Identify
7. Behaviour change techniques
8. Mechanisms of action
9. Modes of delivery
A Behavioural Approach

Stage 1: Understand the behaviour

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Behavioural insights for intervention design
A Behavioural Approach

Stage 2: Identify Intervention Options

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The Behavior Change Technique Taxonomy (v1) of 93 Hierarchically Clustered Techniques: Building an International Consensus for the Reporting of Behavior Change Interventions

Susan Michie, DPhil, CPsychol · Michelle Richardson, PhD · Marie Johnston, PhD, CPsychol · Charles Abraham, DPhil, CPsychol · Jill Francis, PhD, CPsychol · Wendy Hardeman, PhD · Martin P. Eccles, MD · James Cane, PhD · Caroline E. Wood, PhD

Published online: 20 March 2013
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MINDSPACE

- Messenger: We are heavily influenced by who communicates information
- Incentives: Our responses to incentives are shaped by predictable mental shortcuts such as strongly avoiding losses
- Norms: We are strongly influenced by what others do
- Defaults: We “go with the flow” of pre-set options
- Salience: Our attention is drawn to what is novel and seems relevant to us
- Timing: Our acts are often influenced by sub-conscious cues
- Affect: Our emotional associations can powerfully shape our actions
- Commitment: We seek to be consistent with our public promises, and reciprocate acts
- Self: We act in ways that make us feel better about ourselves

 behaviour change techniques
NHS Health Check Digital Exemplar

• The NHS Health Check programme plays a crucial role in prevention, early detection and management of non-communicable diseases (specifically CVD).

• The Health Check Exemplar multidisciplinary team set out to understand the NHS Health Check service from the public’s, providers’ and commissioners’ viewpoint blending service design and behavioural insights research principles.

• The project vision is to understand what service changes both digital and non-digital could improve the health check service focusing but not limited to
  • Increasing uptake of the service
  • Increasing the impact of the service
The NHS Health Check, a care pathway

- **Invite**
  - Awareness raising
  - Invitation and reminders
  - Booking and reminders

- **Assessment**
  - Tests
  - Risk assessment
  - Risk communication

- **Follow up**
  - Pre-existing CVD management
  - Cholesterol; Hypertension; AF: Optimal clinical and healthy lifestyle follow up
  - Optimal healthy lifestyle behaviour change follow up
  - Diabetes Prevention Programme
  - No action

5 year Recall

Support and Care Planning

Referral

Behavioural insights for intervention design
Identify the target behaviours

“Behaviour is anything a person does in response to internal or external events”

(Hobbs Campbell, Hildon & Michie, 2011)

Behaviour should be differentiated from:

• its determinants (self-efficacy, emotion)
• and its outcomes (quality of life, cholesterol level)
Task 1
Identify behaviours along the NHS Health Check journey
Specify the target behaviour in detail

Specify the behaviour target in detail

- *Who* needs to do *what* differently to achieve the desired change?
- *When* do they need to do it?
- *Where* do they need to do it?
- *How often* do they need to do it?
- *With whom* do they need to do it?
- *In what context* do they need to do it?
Task 2

Identify the drivers of one of the behaviours in Task 1 using the COM-B model
COM-B: Understanding the target behaviour

- Psychological or physical ability to enact the behaviour
- Reflective and automatic mechanisms that activate or inhibit behaviour
- Physical and social environment that enables the behaviour

Michie et al (2011) Identify what is driving the behaviour and then where best to intervene.

Behavioural insights for intervention design 13
<table>
<thead>
<tr>
<th>COM-B model components</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Psychological capability</td>
<td>Knowledge, psychological skills (such as planning, attention, strength and stamina) to engage in the necessary mental processes (interpersonal skills, memory, attention, decision processes).</td>
</tr>
<tr>
<td>Physical capability</td>
<td>Physical skills, strength or stamina.</td>
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<tr>
<td>Reflective motivation</td>
<td>Active thought processes – attitudes and beliefs about what is good or bad, the costs and benefits of doing something, beliefs about consequences, goals, plans, and intentions.</td>
</tr>
<tr>
<td>Automatic motivation</td>
<td>Less conscious thoughts processes that drive behaviour - emotional reactions, desires (wants and needs), impulses, drive states, habits, reinforcement, associative learning and reflex responses.</td>
</tr>
<tr>
<td>Social opportunity</td>
<td>Opportunity afforded by the social environment, social cues and cultural norms, social acceptability and expectations.</td>
</tr>
<tr>
<td>Physical opportunity</td>
<td>Opportunity afforded by the environment involving time, resources, locations, cues.</td>
</tr>
</tbody>
</table>
Task 3
Identify the intervention functions that could effectively change behaviour
Intervention Functions

- Sources of behaviour
- Intervention functions
- Policy categories

Behavioural insights for intervention design
<table>
<thead>
<tr>
<th>Intervention function</th>
<th>Definition</th>
<th>Example of intervention function</th>
<th>Not example of intervention function</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education</td>
<td>Increasing knowledge or understanding</td>
<td>Providing information to promote healthy eating</td>
<td>Providing cooking lessons (<em>this is training as the aim is to impart skill rather than increase knowledge</em>)</td>
</tr>
<tr>
<td>Persuasion</td>
<td>Using communication to induce positive or negative feelings or stimulate action</td>
<td>Using imagery to motivate increases in physical activity</td>
<td>Providing information on benefits of physical activity (<em>this is education as the aim is to increase knowledge about the impact of physical activity</em>)</td>
</tr>
<tr>
<td>Incentivisation</td>
<td>Creating an expectation of reward</td>
<td>Using prize draws to induce attempts to stop smoking</td>
<td>Using positive images of non-smokers to encourage smokers to quit (<em>this is persuasion as there is no direct reward</em>)</td>
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Our attempts to **change** a behaviour will be more effective if they target its **causes**
Why it is important to use a framework

- Selecting key behaviour to target intervention and understanding the drivers of this behaviour will allow for selection of suitable intervention type from various options.

- If intervention does not work, troubleshooting is easier and alternative intervention options can be selected and trialled.
Questions?

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