Guidelines for intervention phone call

Aims of the call:

- a) Ensure that participants have a thorough understanding of what the intervention is about and what they need to do.
- b) Help participants to consider how the tips can be fitted into their lifestyle and work through any problems they may have.
- c) Motivate participants to keep going with the intervention for a full three months, in the first instance, with a view to the changes becoming part of their lifestyle on-going.
 - a. Factors to bear in mind that may help with this:
 - i. The simplicity of the intervention.
 - ii. The benefits they should experience from following the tips.
 - iii. Following the tips over a longer period will make it more likely that healthy habits develop.
 - iv. The importance of keeping track of progress.

Try to emphasise:

- a) That the advice is based on scientific evidence and the WCRF guidelines for cancer prevention and survivorship
- b) The idea of habits and why this might help them keep any changes up over the longer term
- c) Why using the Healthy Life Action Plan might help
- d) Small changes- building up over time.

Logistics

Please ensure you have:

- The participants' baseline measures; pay special attention to the areas you need to draw upon, i.e. their medical history and any behaviours they are already doing well/not
- Potential areas for change for the individual.
- The website open in front of you
- Notepaper.

The call should last around 30 minutes. Please keep an eye on time and sensitively curtail discussion on topics that are not relevant.

Script

1. Introduce yourself

Explain who you are and state that you are calling about the ASCOT cancer and lifestyle trial. Ask if this is a good time to talk. If not arrange a good time to call back.

If yes, have they received the lifestyle booklet in the post?

Yes – ask if they have had a look through?

- Yes are you happy for us to go through it together now in a bit more detail? You can also ask me any questions you may have as we go along. Have you been able to access the website?
- No No problem. Are you happy for us to go through it together now? You can also ask
 me any questions you may have as we go along. Do you have internet access to look up
 the website? (Offer to send things if needed/relevant)

No – apologise. Check their postal address, say we will resend it and call back when they should have received it.

2. Discuss current lifestyle and their cancer

a) Explain to the participant that you have their responses to the questions they answered previously in front of you. We want them to know we are sensitive to their medical history, so summarise briefly what you know about their cancer.

E.g. I understand you were diagnosed with breast cancer 18 months ago and you had surgery 16 months ago? Have you found this has had an impact your lifestyle? If yes, then we will of course bear that in mind when we discuss making changes.

b) Direct them to the 'Get started now' section of the ASCOT booklet. Explain that the goals are all based on scientific evidence and that they are in line with the World Cancer Research Fund guidelines. Ask if they had thought about any areas they might like to work on?

If yes- ask which areas they selected that they want to change. Compare these with your list. If they are the same, say that those seem really sensible. Give them the details you have from their baseline measures (e.g. pedometer info and confirm which recommendations they are meeting/not) and

If they are different, say those seem like good ideas, there might be other areas you could work on that would benefit you a bit more e.g. (say they are meeting x recommendations, but could potentially improve on...).

If no - say that's fine, we can think about it together now...From your data, it looks like there may be some areas where small, lifestyle changes might be beneficial. Tell them which recommendations they are meeting and be really positive about that. Then outline the areas which we think they could benefit most from changing.

c) If the responses are positive ask if they have thought about how they might make the changes and move on to section 3.

If the responses are negative discuss barriers and see if you can problem solve with them to encourage change in the areas they will benefit most from. You will need to summarise the specific benefits associated with each goal if they have not yet read the leaflet so have these to hand. Emphasise that the goals are all based on scientific evidence and that they are in line with the World Cancer Research Fund guidelines. Give them a bit more detail if needed. (Mention that if they would like more information on these guidelines, the science behind them, or the WCRF the booklet has the relevant website and contact info). Be open to change in other areas if they would prefer. Some common barriers/issues are discussed in section 5 below.

3. Making changes

a. Creating new habits

Discuss their ideas for change if they have them. Do they fit with the habit model? Emphasise that the changes do not have to be huge, or take up too much time or money, and that **the idea is that the changes become habits.** When we talk about something being a habit, essentially this means that in the long term it will be integrated into what you do day-to-day and you will do it without having to really think about it.

(Please note we are not sure how long it takes to form a habit – the median is 66 days, but it varies from 18 to 254 days. Lally et al, 2009)

b. Tools

Say there are several strategies you can use to help you make new habits, which you will run through briefly now, as it is good to have them in mind when talking about the changes they might make.

Sticking to a Daily Routine

To make a change part of your daily routine, you need to do it again and again, in a similar situation or at a similar time. This way, things should get easier over time. For example, you probably brush your teeth twice a day, morning and night? You probably do this as part of your routine, without thinking too much about it.

Make a plan

To help make the changes part of your routine, try to plan ahead:

- In the first week or two, spend time working out in advance how you are going to stick to the changes
- Focus on what you actually plan to do, not just the result you are hoping for

For example rather than: "I'm going to try hard to eat five fruit and vegetable portions a day", a better plan would be: "I will have a piece of fruit at breakfast, or after lunch and dinner to increase my fruit intake".

Be prepared

Being prepared will make it easier for you to stick to your changes. For example:

- If you plan to walk to the train station, allocate extra time for your journey
- If you plan to eat fruit at home, make sure you buy fruit when you go shopping

Keep track of how you are doing

Research shows that people who keep track of what they are doing are more successful at developing healthy habits. You can use the action plan provided to do this. Ask if they have had a chance to look at that? It has been designed so you can stick them on the fridge/have them by the bed/computer/in your handbagwherever it will be most useful to them. Emphasise that it should help remind them of their goals and plans and hopefully they will also find it encouraging to see how they are progressing.

Say you will now talk through some action plans!

4. The intervention

Take one of their goals and ask them for ideas on how they might achieve that- a more specific every day (or every week) habit.

Ask how it will fit within their routine- what time of day might they do it? How long for? Try to get them to be as specific as possible.

Ask them what they will need to do to make sure it will happen (give examples if needed)? Will they need reminding for the first few weeks? Do they need to buy/prepare anything? (suggest a pedometer/app if working on steps)? Do they need extra time? What will they do if something changes/gets in the way? (e.g. rain)

Remind the participant that keeping track of their behaviours could be key to success!

Explain how participants may find it useful (especially when they first make changes) to give themselves little rewards if they stick to their tips for a certain period of time. Explain how we reward ourselves all the time in our everyday lives, for example having a cup of tea after doing the hoovering, and say this is a useful way of getting ourselves to do things! Ask if they have any ideas for rewards and encourage them to think of non-food rewards. (for example: watching a favourite film, reading a magazine, having a bath).

Summarise the plan and ask if they can foresee any problems/ barriers to making that change?

Problem solving:

When participants identify barriers to carrying out the behaviours help them to overcome them:

- Help them to think of as many solutions as they can.
- Weigh up the options and get them to think which will work best for them.
- Ask them to write down what's been decided (perhaps once off the phone), so they can refer back to it later.

Repeat this section for more than one change if time or ask if they feel like they can do the same for other areas of change (if relevant).

Despite the emphasis on simplicity participants may feel overwhelmed at the thought of making lifestyle changes. Having discussed all the changes ask the participant if they have any overall worries or concerns. Problem solve again, if required.

You can also remind them that they could start by just making one or two changes (perhaps having discussed three they may feel like it's too much) and building it up from there. Remind them that they should only introduce changes that they think are achievable and if things don't work out they can adapt them as they go along.

5. Example problems & barriers

"I was healthy before but I still got cancer- why should I change now?"

Empathise and acknowledge there are no guarantees- these recommendations are just based on the best evidence. But what leads to cancer is often a complex interaction of things and bad luck/genes can certainly play a part. Ask them to think about other benefits to a healthy diet/PA- how did it make them feel? Are these benefits worth changing for?

"I want to lose weight" (There aren't any tangible benefits)

Discuss potential 'tangible' benefits such as improved well-being. Say that it's easier to change behaviour than weight-a number on a scale. To change weight you need to change behaviour. These changes may have an impact on weight but are also beneficial in their own right.

"I don't have time"

Emphasise that the idea is to make small changes and build up- they shouldn't take too much time. Ask them to take you through their typical day and see if there are potential 'moments' where things could be changed. E.g. getting up during adverts or at points during the day at work. Going for a walk at lunchtime. Dietary changes should take even less time!

"I'm already meeting all the recommendations"

If they are- that's great. Do they think they will be able to keep it up? Discuss if they'd like to be even more active. If they aren't but think they are, discuss this discrepancy sensitively

and if they might like to change the things we believe they could benefit from. improvements on.

6. Close

Summarise what you have covered. Check if that all seems ok. Ask if they have any final questions. Let them know we will be in touch in 3 months time.

End on a positive note – be encouraging about the start of their positive changes!

Thank them for their time and remind them they have our contact details and about the website should they need anything over the next 3 months.