What problem was this research addressing?

Obesity is a global problem which is on the increase. Being overweight in early and mid-adulthood increases the risk of developing a wide range of diseases in later life and has large financial implications for the provision of health services. Policies to increase the uptake of healthy lifestyles are required.

What this research adds

While there is evidence that interventions to prevent overweight and obese people gaining more weight reduce morbidity, less is known about the factors that influence compliance with such programmes. We know that people register for weight loss regimens in huge numbers and drop out in equally huge numbers, but not why this happens. We also know that people differ in their likelihood to take-up and maintain healthy lifestyles. Understanding take-up of, and compliance with, lifestyle intervention programmes is necessary to design effective and efficient interventions. We used a discrete choice experiment (DCE) to investigate preferences for alternative lifestyle interventions to reduce obesity.

Methods

DCEs require individuals to make trade-offs between the attribute levels presented. The attributes and levels in this study, derived from literature reviews, focus groups and a survey are shown in Table 1.

Table 1: Attributes and levels within the DCE

<table>
<thead>
<tr>
<th>Attributes</th>
<th>Levels</th>
</tr>
</thead>
<tbody>
<tr>
<td>Content of programme</td>
<td>Healthy eating; Healthy eating with support for management; Physical activity; Physical activity with support for management; Healthy eating and physical activity; Healthy eating and physical activity with support for management</td>
</tr>
<tr>
<td>Weight change after 2 years</td>
<td>No change; Lose half stone; Lose one stone; Lose one and a half stone</td>
</tr>
<tr>
<td>Short term goal</td>
<td>Look better; Feel better; Look and feel better</td>
</tr>
<tr>
<td>Reduced risk of developing type 2 diabetes</td>
<td>No reduction; Small reduction; Moderate reduction; Large reduction</td>
</tr>
<tr>
<td>Reduced risk of high blood pressure</td>
<td>No reduction; Small reduction; Moderate reduction; Large reduction</td>
</tr>
<tr>
<td>Time per day</td>
<td>30 minutes; 60 minutes; 90 minutes; 120 minutes</td>
</tr>
<tr>
<td>Costs per week</td>
<td>£1; £5; £10; £20</td>
</tr>
</tbody>
</table>

Best practice methods were used to identify 12 choice sets to present to respondents (see Figure 1 for an example).

Key Findings

- Financial incentives can help increase uptake of weight management interventions in the general population.
- People prefer to manage their weight using physical activity interventions over changing their diet.
- Personal behaviour change support for weight management is beneficial, but not valued highly.
- People prefer to maintain their current lifestyle – which poses a challenge for policy-makers aiming to reduce obesity.
Despite evidence that dietary interventions are the most effective way to lose weight, respondents preferred lifestyle interventions involving physical activity. Whilst the evidence shows that behaviour change support improves effectiveness of interventions, its value to participants was limited. A general preference to maintain current lifestyles, together with the sensitivity of take-up to financial costs, suggests financial incentives could be used to help maximise up-take of healthy lifestyle interventions. Men required more compensation to take up healthier lifestyles.

**Research Highlights**

- Despite evidence that dietary interventions are the most effective way to lose weight, respondents preferred lifestyle interventions involving physical activity.
- Whilst the evidence shows that behaviour change support improves effectiveness of interventions, its value to participants was limited.
- A general preference to maintain current lifestyles, together with the sensitivity of take-up to financial costs, suggests financial incentives could be used to help maximise up-take of healthy lifestyle interventions.
- Men required more compensation to take up healthier lifestyles.

**References**


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