# The use of incentives in the formation of healthy lifestyle habits following the school to work transition

Submission date	<b>Recruitment status</b> No longer recruiting	Prospectively registered		
22/11/2013		[X] Protocol		
Registration date	Overall study status	[] Statistical analysis plan		
27/12/2013	Completed	[_] Results		
Last Edited	Condition category	Individual participant data		
04/10/2018	Nutritional, Metabolic, Endocrine	[_] Record updated in last year		

#### Plain English summary of protocol

#### Background and study aims

Rising levels of inactivity and poor diet are important concerns to public health, considering the increased incidence of obesity. While physical activity declines across the life course, this may be accelerated as a result of particular life events. One key point is during adolescence and early adulthood, and it is possible that leaving school (i.e., losing all the opportunities and encouragement for physical activity that school attendance entails), may be a contributor to this. Similarly, young people develop greater control over their diet during late adolescence (e.g., leaving controlled school and home eating environments to go to work), and potentially set down habits for how they will eat over coming years. Young people with low incomes and social resources are at particular risk of developing risky health behaviours (e.g., poor diet and an inactive lifestyle). We see the transition from school to employment to provide an opportunity to change behaviour; this is because it is much easier to break habits when your environment changes than when routines are established. This work will test an intervention to promote and maintain healthy lifestyle habits in young people leaving school for work. Engaging young people in health promoting initiatives is notoriously difficult, so to try and ensure good participation levels we will also test whether incentives can be used to prompt such changes. Findings from this work will provide valuable information to inform policy on the feasibility of health promotion with this under-researched and hard-to-reach group.

#### Who can participate?

All pupils in their final year of education before taking up employment or work-based learning within participating schools can take part in this study.

#### What does the study involve?

Students will be recruited to the project before leaving school, and invited to an information session at their local leisure centre. They will be randomly allocated to one of three groups: behavioural support, behavioural support with incentives or information only control group.

What are the possible benefits and risks of participating? Participants in the intervention groups will benefit from receiving 3 months of free access to their local leisure centre, plus behavioural support to help them to set and reach their own physical activity and dietary goals. Participants in the control group will receive information about healthy lifestyles. There are no obvious risks related to participation.

Where is the study run from?

The study is run from secondary schools in the Bath & North East Somerset (UK) and Wiltshire (UK).

When is the study starting and how long is it expected to run for? The study began in February 2009 and ran until in June 2011.

Who is funding the study? National Prevention Research Initiative (NPRI), UK.

Who is the main contact? Dr Martyn Standage M.Standage@bath.ac.uk

## **Contact information**

**Type(s)** Scientific

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## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers G0701878

## Study information

Scientific Title

The use of incentives in the formation of healthy lifestyle habits following the school to work transition: a cluster randomised controlled trial

#### **Study objectives**

1. The study will test whether a theoretically derived intervention (based on the principles of self-determination theory) can promote the adoption of healthy physical activity and dietary habits in young people leaving school for work.

2. Financial incentives (in the form of 4 x £10 vouchers) contingent on continued attendance at behavioural support sessions (rather than target behavioural outcomes) will promote engagement with the programme; this will foster better outcomes through promoting higher exposure to intervention content.

3. Participant outcomes in terms of health behaviours and well-being will be mediated by increases in their perceptions of an autonomy supportive teaching context, satisfaction of autonomy, competence, relatedness and also by improved levels of autonomous motivation.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

University of Bath, School for Health Research Ethics Approval Panel, March 2009

#### Study design

Cluster randomised controlled trial

**Primary study design** Interventional

### Secondary study design

Cluster randomised trial

#### Study setting(s)

Other

#### Study type(s) Quality of life

#### Participant information sheet

Not available in web format, please use the contact details to request a patient information sheet

#### Health condition(s) or problem(s) studied

Health promotion (physical activity and diet)

#### Interventions

Participants are randomised to one of three groups

1. Three months of behavioural support for promoting a healthy diet and physical activity 2. Three months of behavioural support with incentives (4 x £10 voucher for driving lessons or mobile phone top-ups)

3. An information only control group.

The intervention was developed by a team of experts in motivation, habit theory, and the delivery of behavioural interventions. A full need assessment was conducted through interviewing young people in the target population, and conducting a thorough literature review. The intervention was then systematically constructed through a process of intervention mapping, that is, matching specific evidence-based behaviour change strategies to the specific determinants of behaviour change important in this context. Leisure centre advisors were provided with a half-day training event prior to participation, which included a rationale of the study, and aims within the study, and provided experience of delivering study content in a style that supported participants sense of autonomy, and confidence in their ability to take control over their health behaviours. Advisors also received a reference manual to consult following the training, and were provided with ongoing support from the research manager. A participant booklet (one issued for each person allocated) guided advisors and participants through the goal-setting process at each appointment. The focus of the intervention was for participants to set their own personal goals for improving/maintaining their diet and physical activity, and monitor their progress against these goals over a three month period. All costs for leisure centre use were covered during the study period, and participants in the intervention arm of the trial received £10 vouchers for continued attendance. At the end of the trial, advisors discussed longterm goals with participants, and facilitated the process of extending membership, or seeking other ways of achieving these goals locally.

#### Intervention Type

Behavioural

#### Primary outcome measure

1. Objectively assessed moderate-vigorous physical activity (MVPA), assessed using Actigraph GT1M accerlerometers

2. Diet quality, assessed using a European Food Frequency questionnaire

Outcomes measured at baseline, 12 weeks, and 52 weeks.

#### Secondary outcome measures

- 1. Weight and height (to provide Body Mass Index scores)
- 2. Motivation towards exercise (BREQ-2)
- 3. Perceived autonomy support for exercise (from study personnel)
- 4. Strength of habits for physical activity
- 5. Strength of habits for dietary intake

Outcomes measured at baseline, 12 weeks, and 52 weeks.

Overall study start date

01/05/2009

**Completion date** 

01/09/2011

## Eligibility

#### Key inclusion criteria

Students in participating schools who are in their final year of study before leaving school for work or work-based learning

#### **Participant type(s)** Other

**Age group** Adult

**Sex** Both

**Target number of participants** 350

**Key exclusion criteria** Students in participating schools leaving school for higher education, or further study (not workbased)

Date of first enrolment 01/05/2009

Date of final enrolment 01/09/2011

## Locations

**Countries of recruitment** England

United Kingdom

**Study participating centre University of Bath** Bath United Kingdom BA2 7AY

## Sponsor information

**Organisation** University of Bath (UK)

**Sponsor details** c/o Lisa Austin Department for Health Bath England United Kingdom BA2 7AY

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**Sponsor type** University/education

Website http://www.bath.ac.uk/

ROR https://ror.org/002h8g185

## Funder(s)

**Funder type** Research council

#### Funder Name

Medical Research Council (MRC) - National Prevention Research Initiative (NPRI) (UK) Ref: G0701878

## **Results and Publications**

**Publication and dissemination plan** Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

**IPD sharing plan summary** Not provided at time of registration

#### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Protocol article	protocol	04/03/2014		Yes	No