

Physical Activity – A Brief Intervention

Practitioners can consider the following example of a brief verbal intervention for inactive patients based on the principles of Motivational Interviewing (MI). Any intervention should be consistent with the agenda on patient led consultations and choice. One way to do this is to base behaviour-change negotiations on the principles of motivational interviewing (MI). Although developed in the field of addictions, brief versions of MI have been adapted and applied to a wide variety of behaviours and conditions such as smoking, diet, physical activity, medical adherence and diabetes, with evidence of effectiveness (*Resnicow et al., 2002; Rollnick, 1999, Rubak, 2005*). Motivational Interviewing elicits change talk in the patient, empowering them to change their own behaviour. Below are example questions for a motivational interview based dialogue.

Example Dialogue for Inactive Patients

Question Set One:

- “On a scale from 0 to 10, where 0 is not important at all, and 10 is extremely important, how important is getting more active for you?”
- “Why did you pick this number? “
- “Why did you not pick a lower number? “
- “What would you need to do to get you to a higher number?”

Question Set Two:

- “Now think about why you want to do this. Think about how you’ll feel, what you’ll look like, what you’ll be able to do that you can’t do now. Also think about what might be stopping you from changing and what will happen if you don’t?”
- “Why do you want to change?”
e.g. To be able to play with children / grandchildren; To help health
- “What will happen if you change?”
e.g. more energy, less lonely, control condition
- “Why you don’t want to change?”
e.g. low confidence, don’t think will enjoy it
- “What will happen if you don’t?”
E.g. condition will get worse, feel bad about self, not be able to play with children/grandchildren

Question Set Three:

- **“If you were to decide to increase your physical activity, how confident are you that you would succeed?”**
- **“If, on a scale of 0 to 10, 0 means that you are not at all confident and 10 means that you are 100% confident you could become more active. What number would you give yourself?”**
- **“Why did you pick this number on the scale?”**
- **“Why did you not pick a lower number?”**
- **“What would you need to do to get a higher number?”**

All the while you're trying to elicit change talk from them and reaffirm these statements back to the patient. Finally, provide the patient with a brief summary of what you heard and then ask,

- **“What do you think the next step is for you?”**

You can talk about the patient's day and work and about when activity could be built in e.g., getting off the bus a stop early or walking children to school. And also talk about activities that might be of interest to the patient whether it's gardening, dance, swimming, cycling, walking or football. A common response is for the patient to say, they don't know or are uncertain. If they do, follow with:

- **“Let's list what the options are at the moment. You could:”**
 1. **Stay as you are and do nothing;**
 2. **Start to increase the amount of physical activity that you do”**

Again this should illicit change discussion.

Go through the patient's day with them, and talk about when activity could be built in e.g. getting off the bus a stop early, joining in a health walk or walking the children to school. Also talk about **what** activities might be of interest to them, signpost to local activities from gardening to dance to football. Ask the patient what they make of these opportunities?

If interested, talk to the patient about appropriate levels of activity and how to build up their activity levels. If someone hasn't been active for a long time going straight into vigorous activity isn't a good idea. Advise patients to build up their activity levels and intensity gradually.

Encourage a patient to set a specific goal such as:

“I will go for a walk on Tuesday at lunchtime at the park for thirty minutes. If I can't make it then I will go on Wednesday.”

In just a few minutes, it is possible to encourage the patient to consider why and how they might change their physical activity without feeling as if they are being pushed or coerced into something they are not ready for.