



Mental Health and Exercise

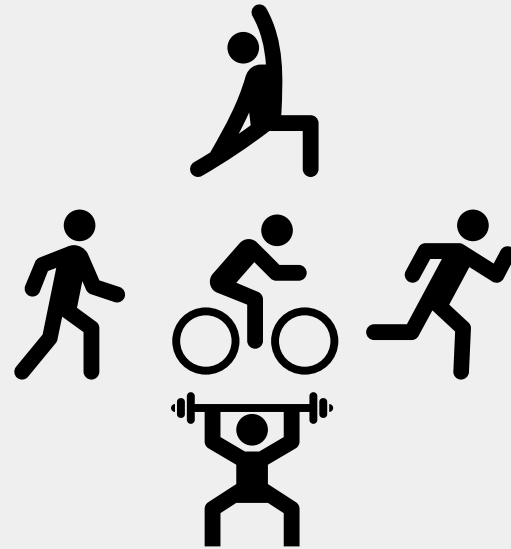
A large, stylized black outline of a human brain is centered in the background. It is surrounded by several decorative elements: red plus signs, red exclamation marks, and small yellow dots, all scattered around the brain's outline.

Keegan Knittle

Liikuntapsykologian apulaisprofessori



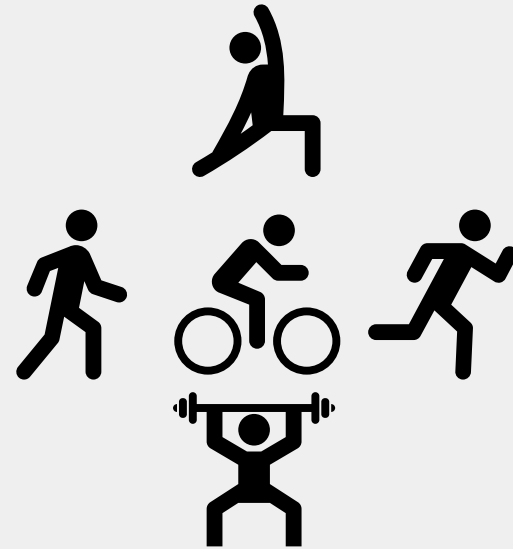
The role of psychology



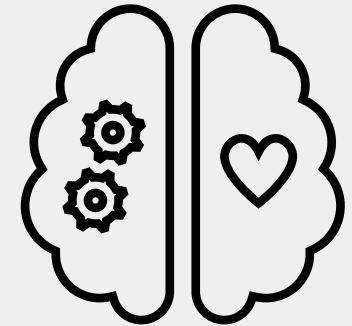
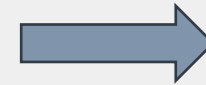
Physical activity



The role of psychology



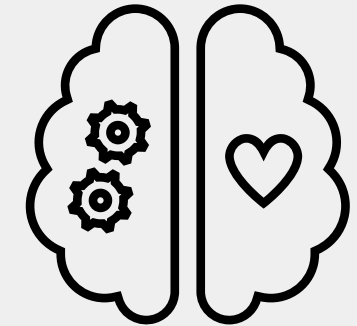
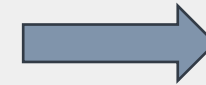
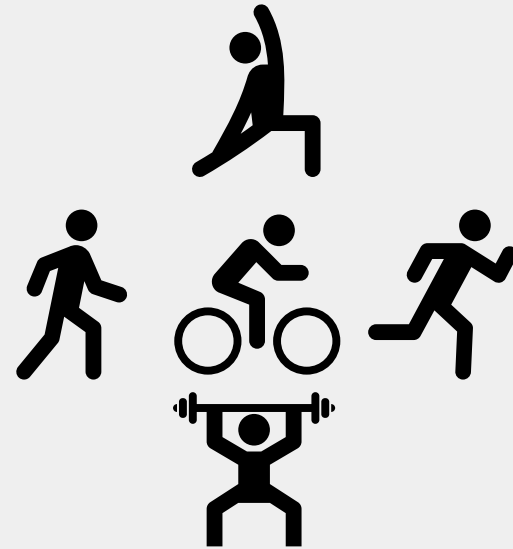
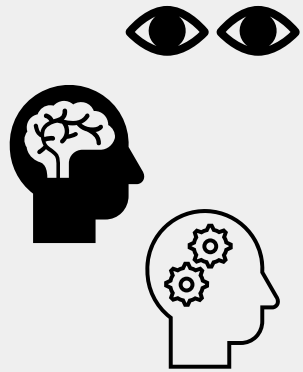
Physical activity



Mental health and well-being



The role of psychology



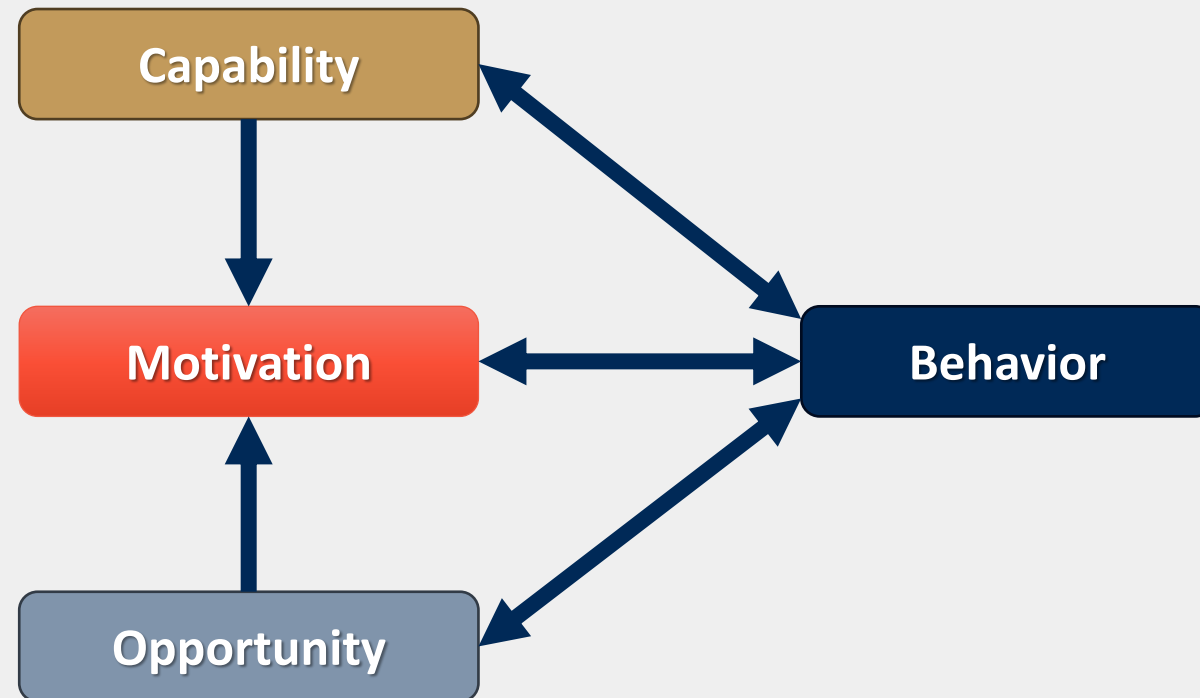
“Behavioral determinants”
Includes biological, social,
environmental and
psychological factors

Physical activity

Mental health and
well-being



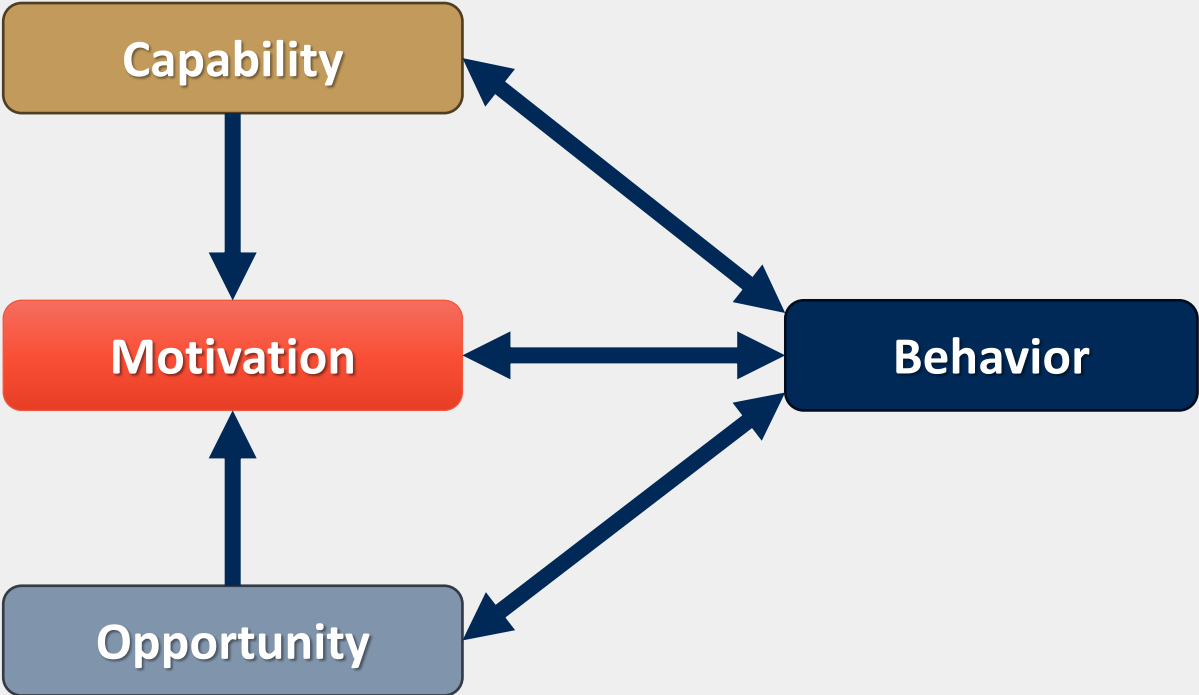
COM-B Model



Michie et al (2011), in
Implementation Science



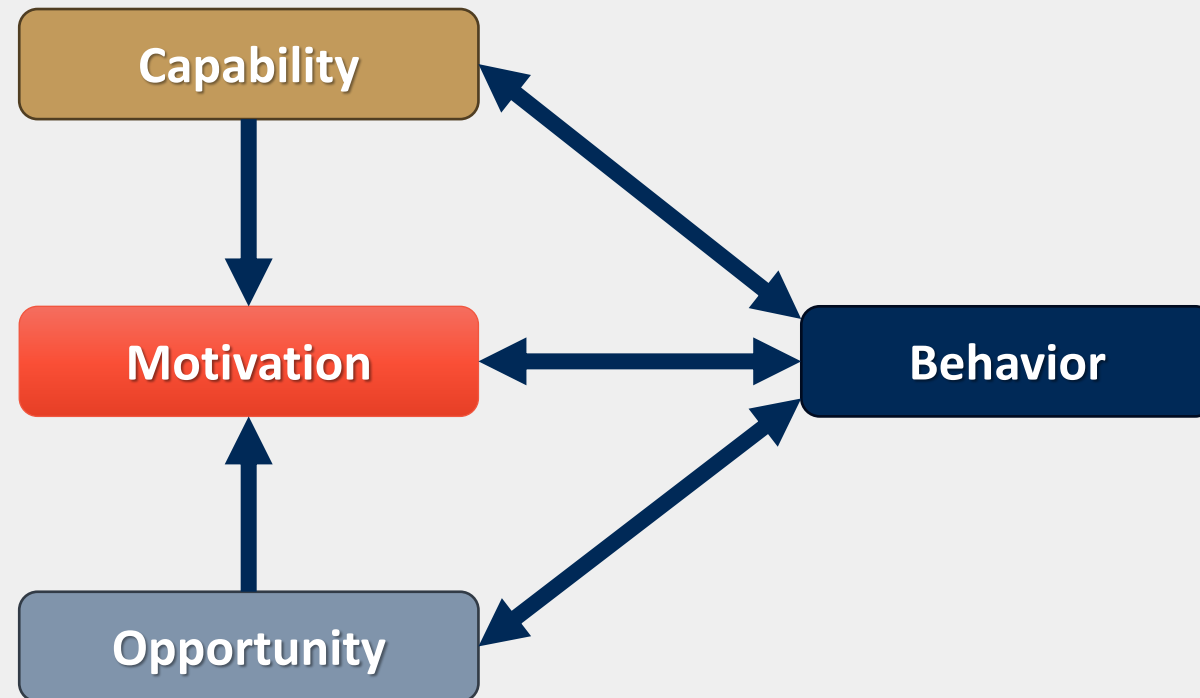
COM-B Model



Michie et al (2011), in *Implementation Science*



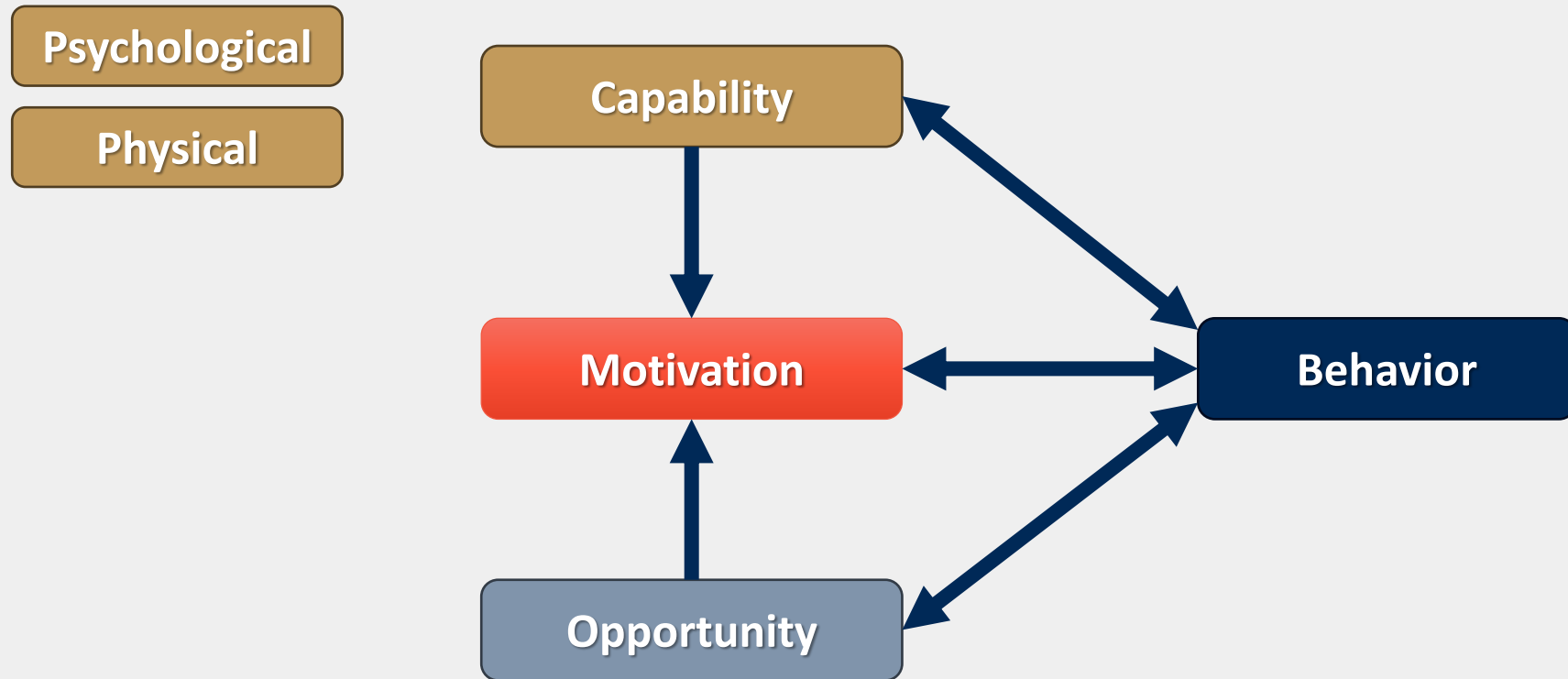
COM-B Model



Michie et al (2011), in
Implementation Science



COM-B Model



Michie et al (2011), in
Implementation Science



Psychological Capability

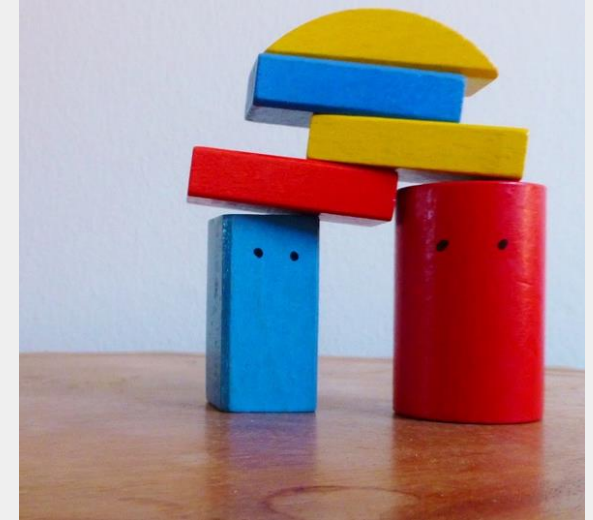
- Self-efficacy
 - Belief in own ability to undertake a behavior
- Perceived control
 - Belief in own control over whether behavior takes place





Building self-efficacy

- Positive (past) experiences
 - Small, achievable tasks with feedback
 - Practice or rehearsal
- Observing positive experiences of similar others
 - Identifying role models
- Persuasion
 - Or self-persuasion?





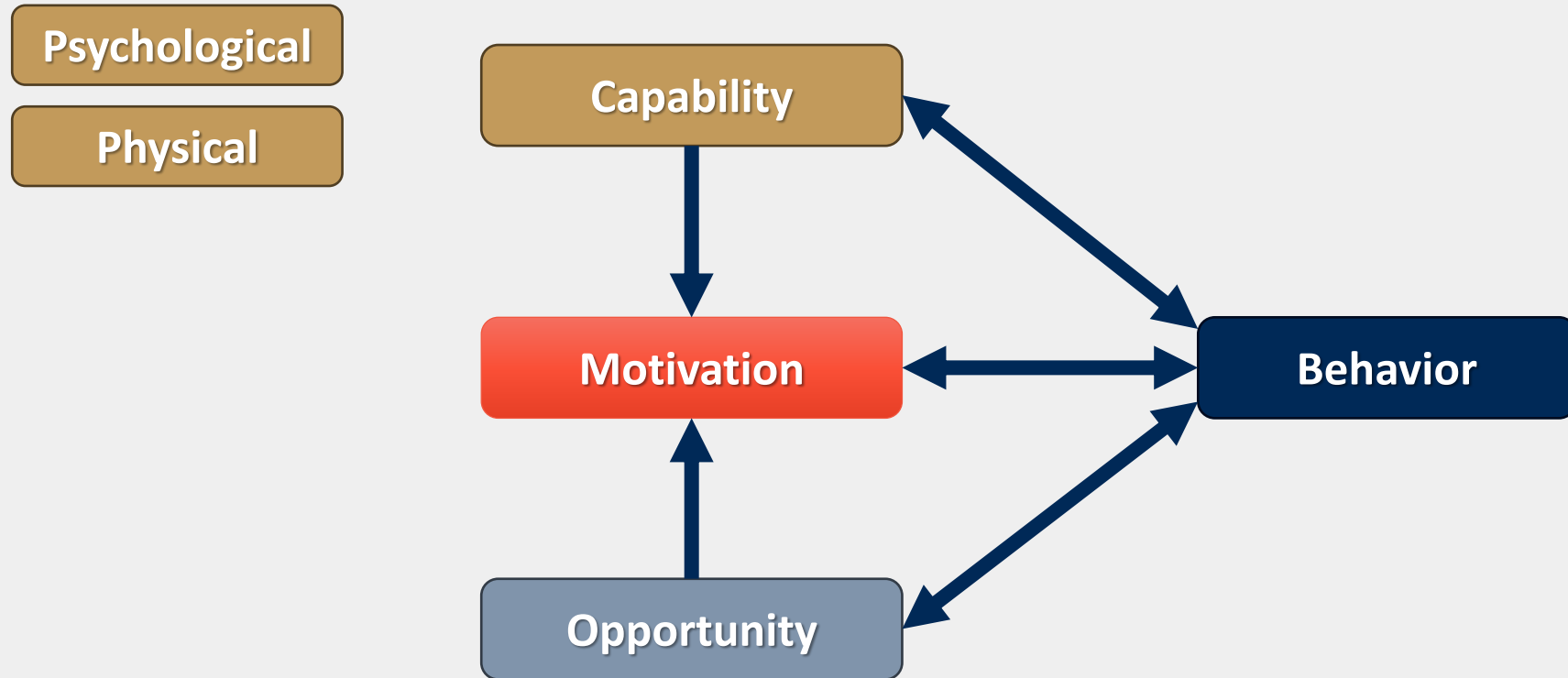
Physical Capability

- People have limitations and preferences
- Important to find match with ability, preferences, and desired outcomes
- This requires clinical knowledge, creativity, effort and an open mind!
 - Guess and test



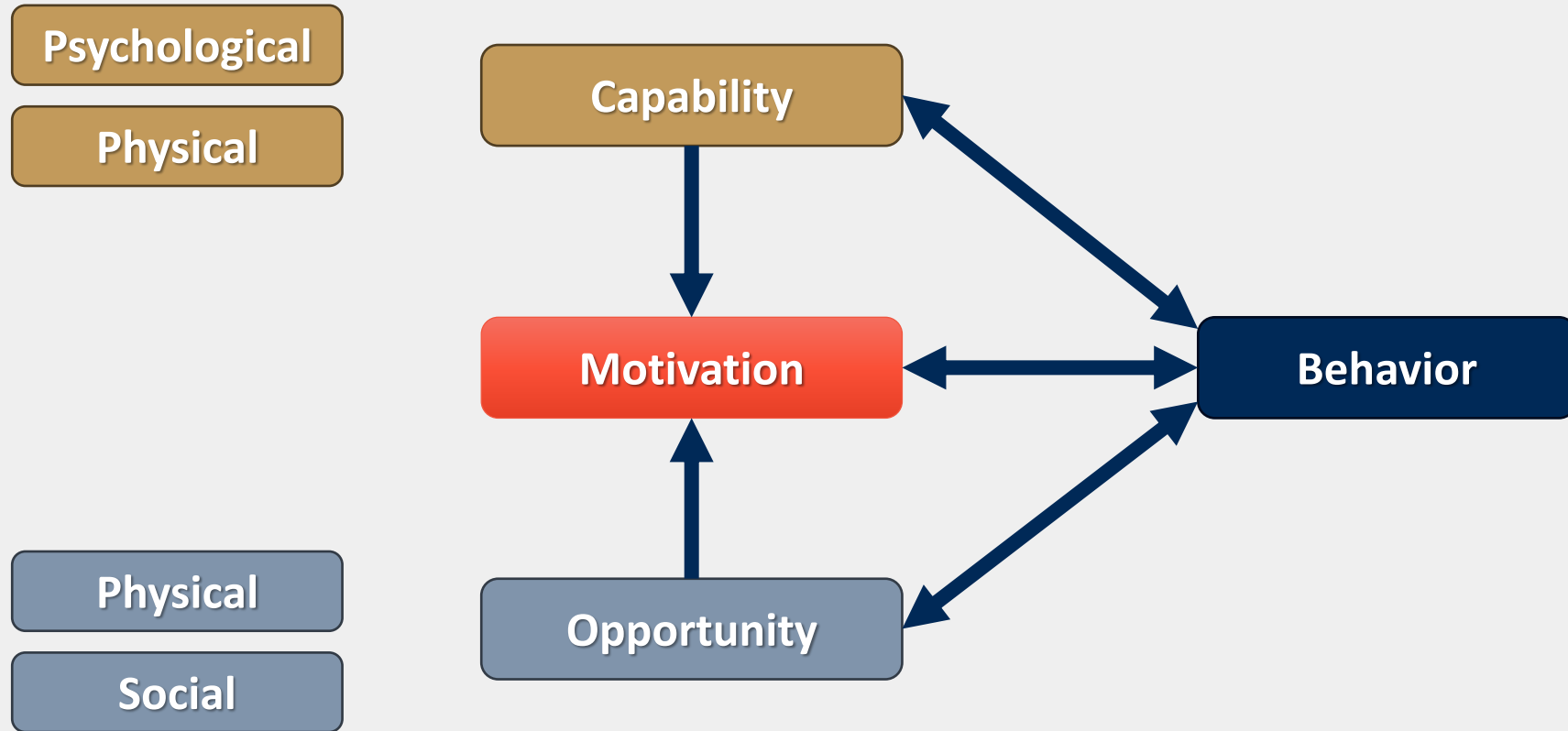


COM-B Model





COM-B Model





Physical Opportunity

Inequality in the Built Environment Underlies Key Health Disparities in Physical Activity and Obesity

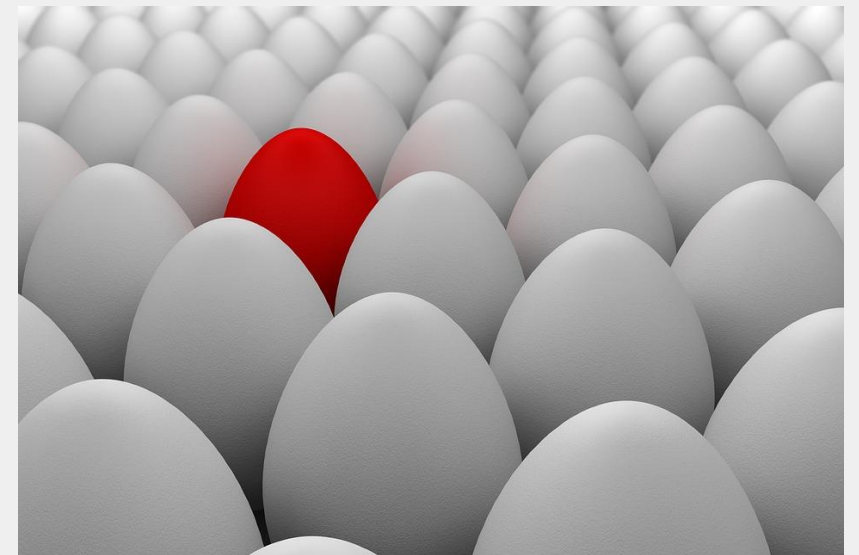
Penny Gordon-Larsen, PhD^a, Melissa C. Nelson, PhD, RD^b, Phil Page, MA^c, Barry M. Popkin, PhD^a

- Parks, sports clubs, nature areas, exercise equipment, etc.
- Helping people to locate opportunities and obtain access is important.



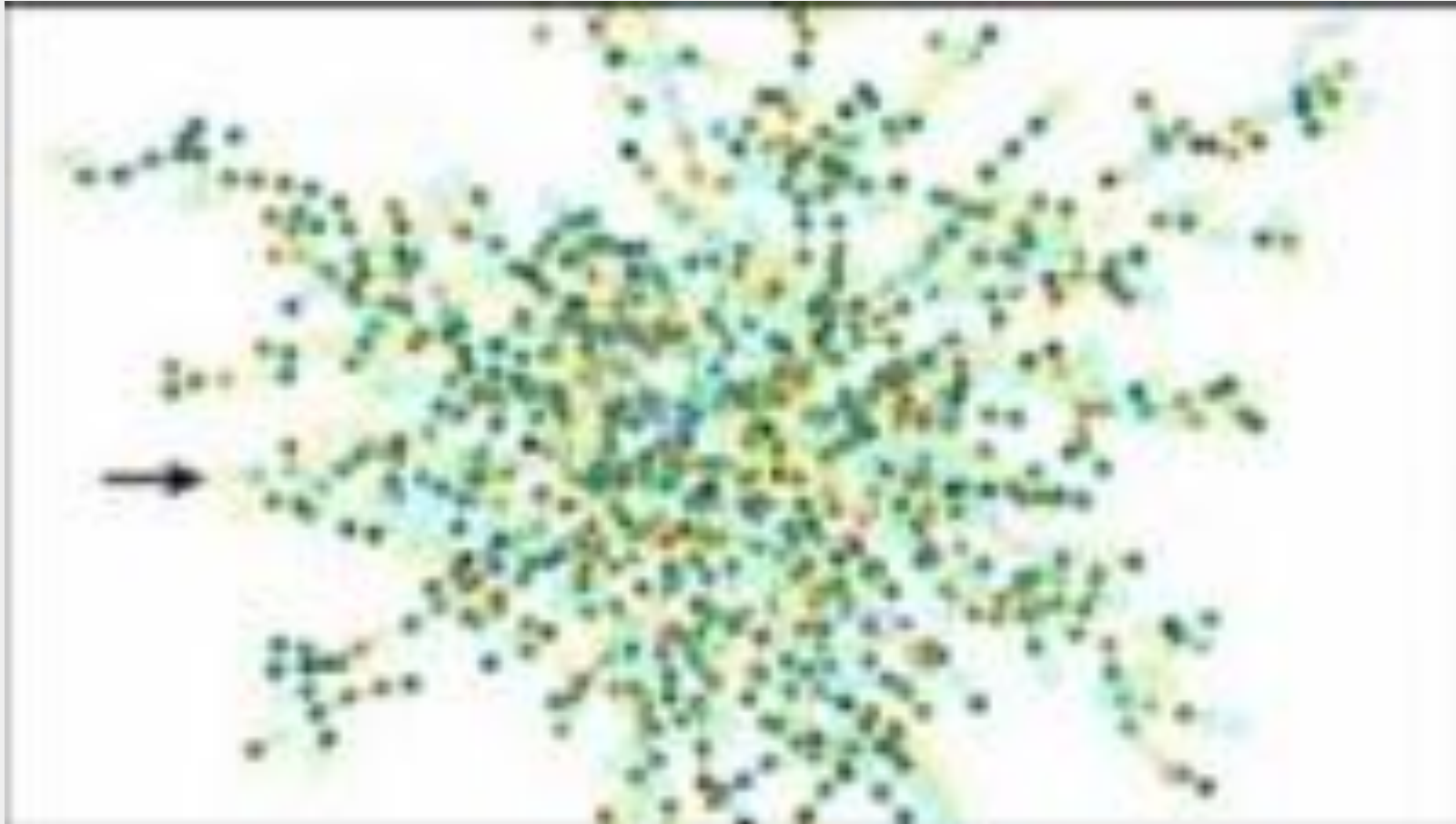
Social Opportunity

- New behavior must be seen as 'normal'
- Social (un)acceptance very important determinant of behavior





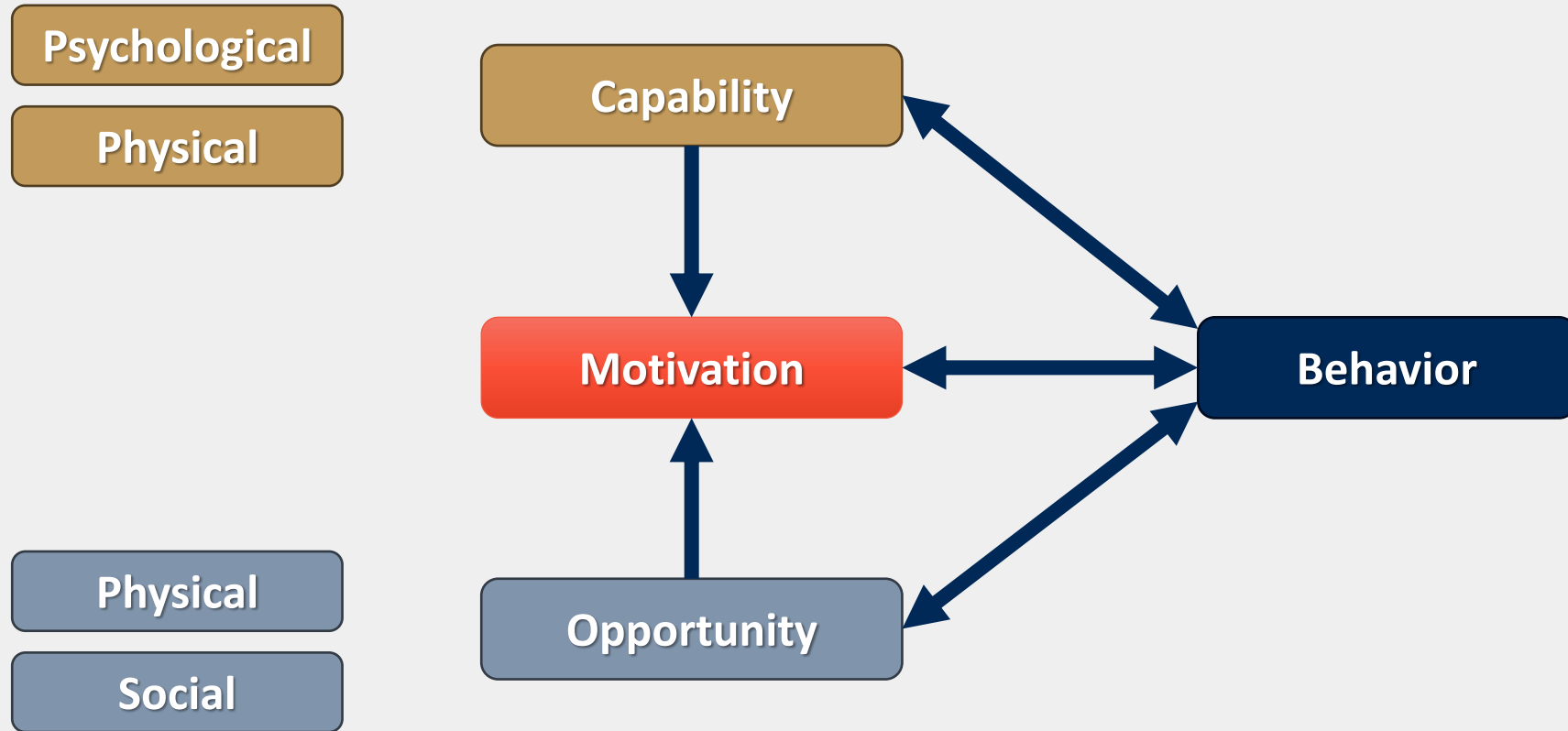
Social opportunity



Christakis & Fowler, "The Collective Dynamics of Smoking in a Large Social Network," *New England Journal of Medicine*, 358(21): 2249-2258 (May 2008) <https://youtu.be/PV-PQa0p2FM>

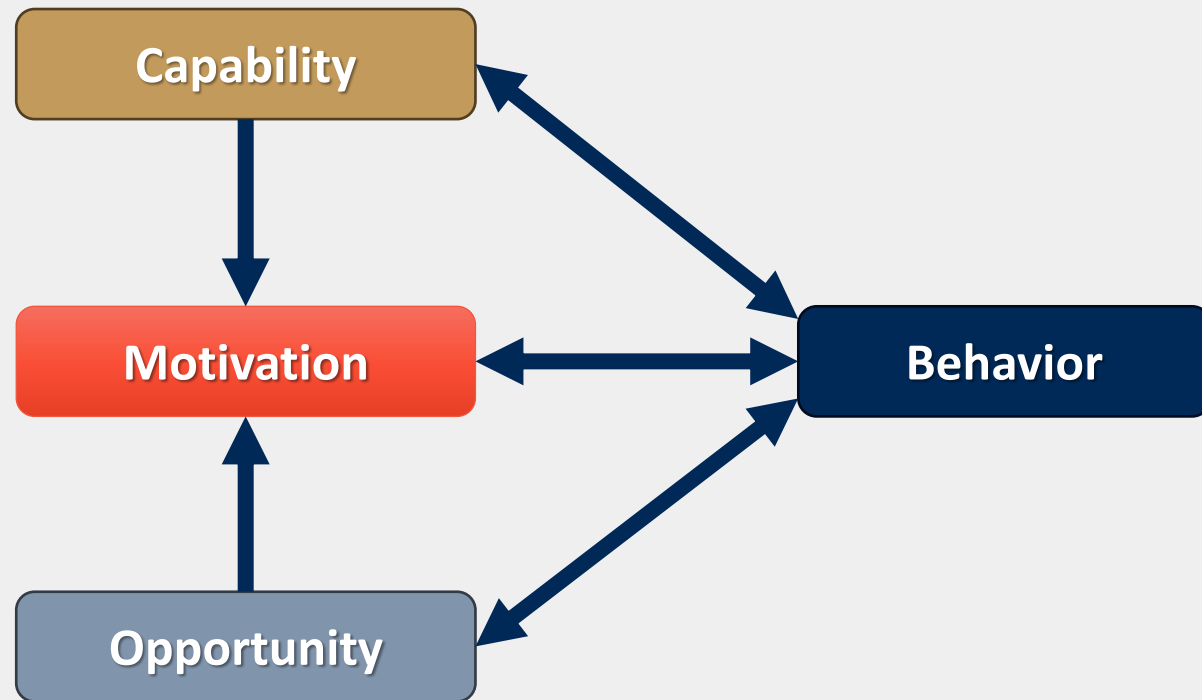
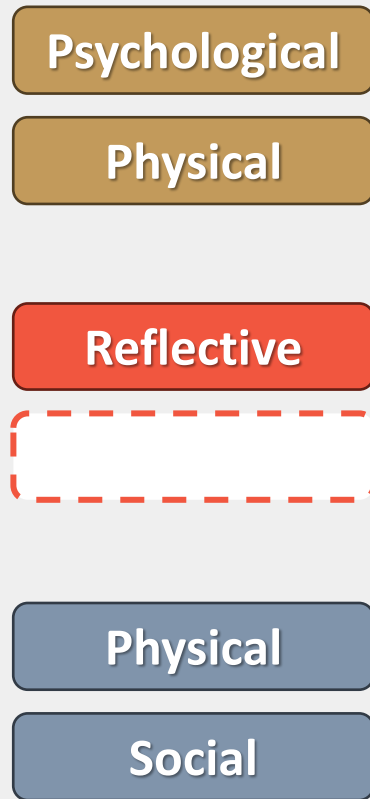


COM-B





COM-B



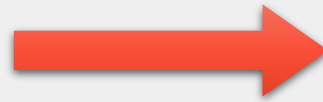


What do behavioral theories say about motivation?

A lot...

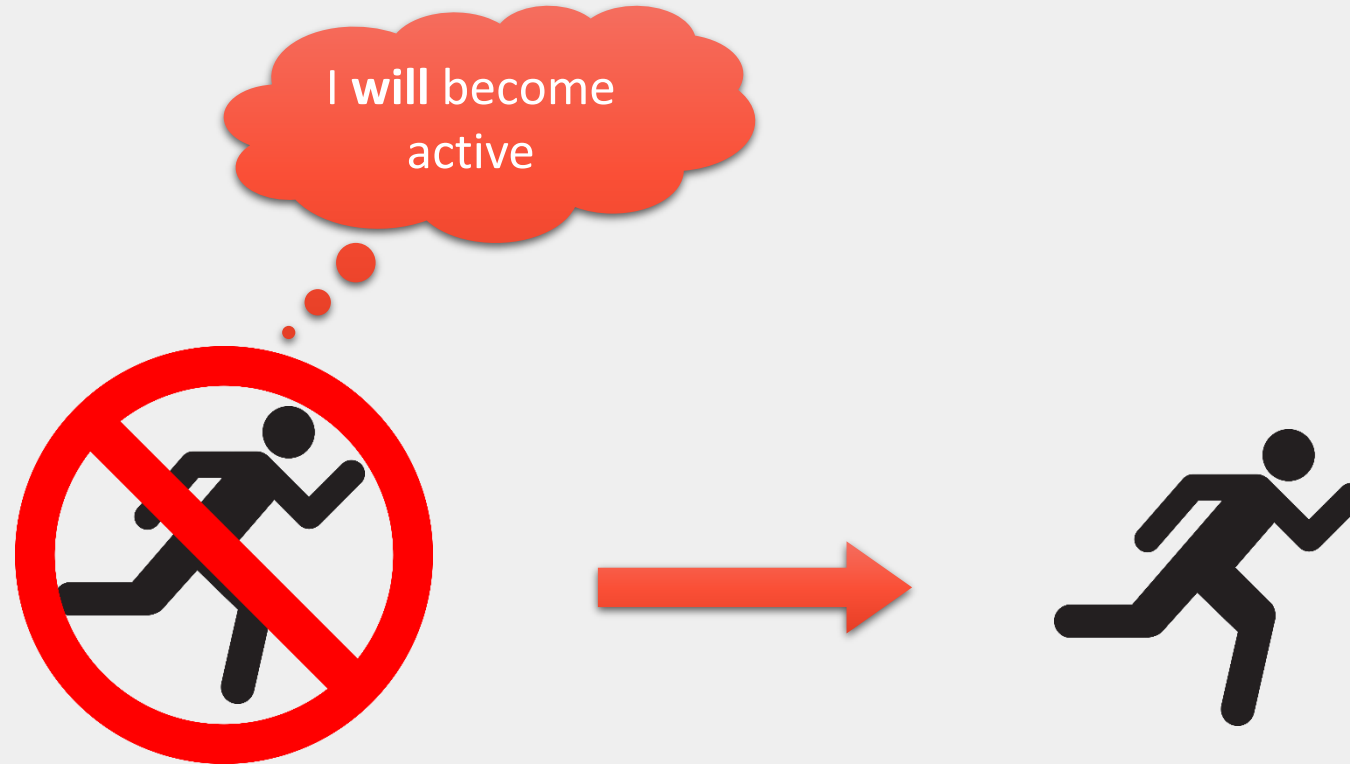


Motivation - From A to B...



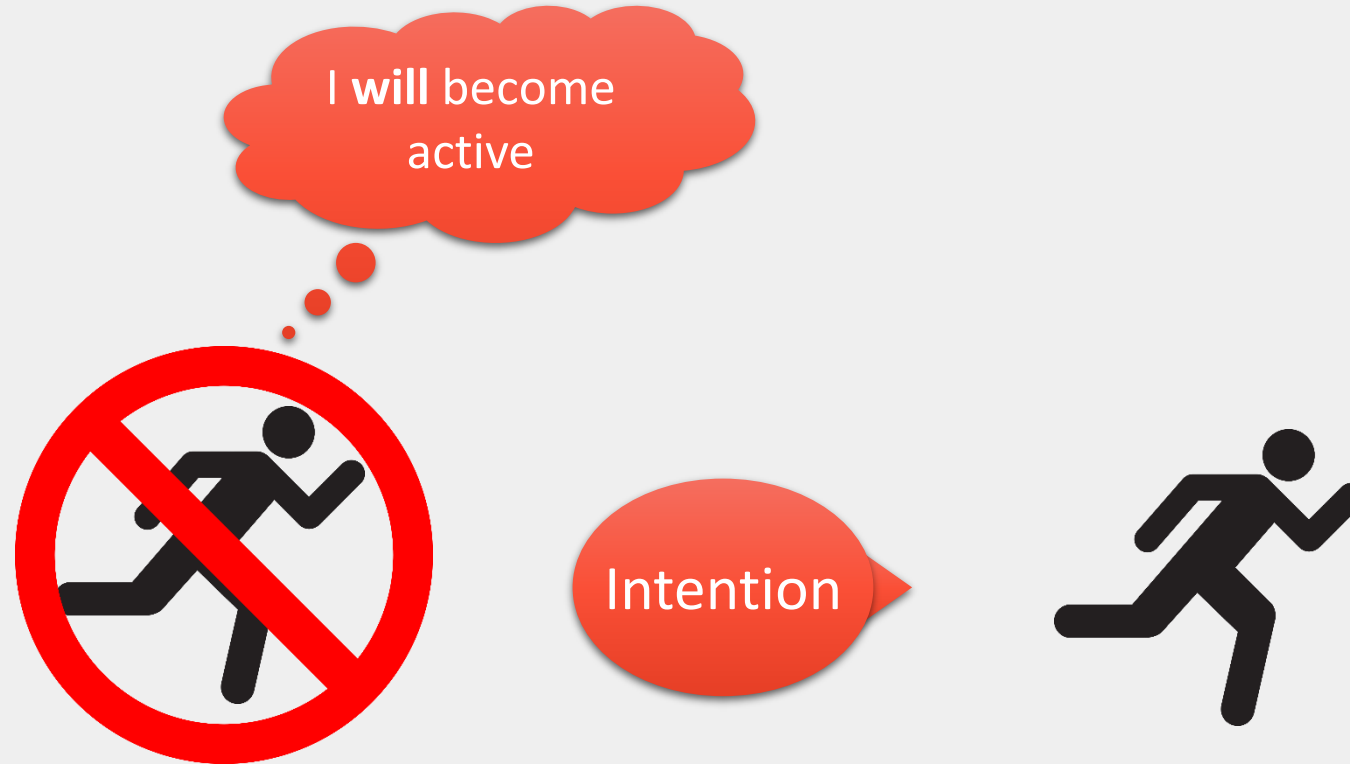


Motivation - From A to B...





Motivation - From A to B...





Intention strength

Do you want to be physically active?

NO! NO NO no meh yes **Yes YES YES!**

Less
Motivation

More
Motivation



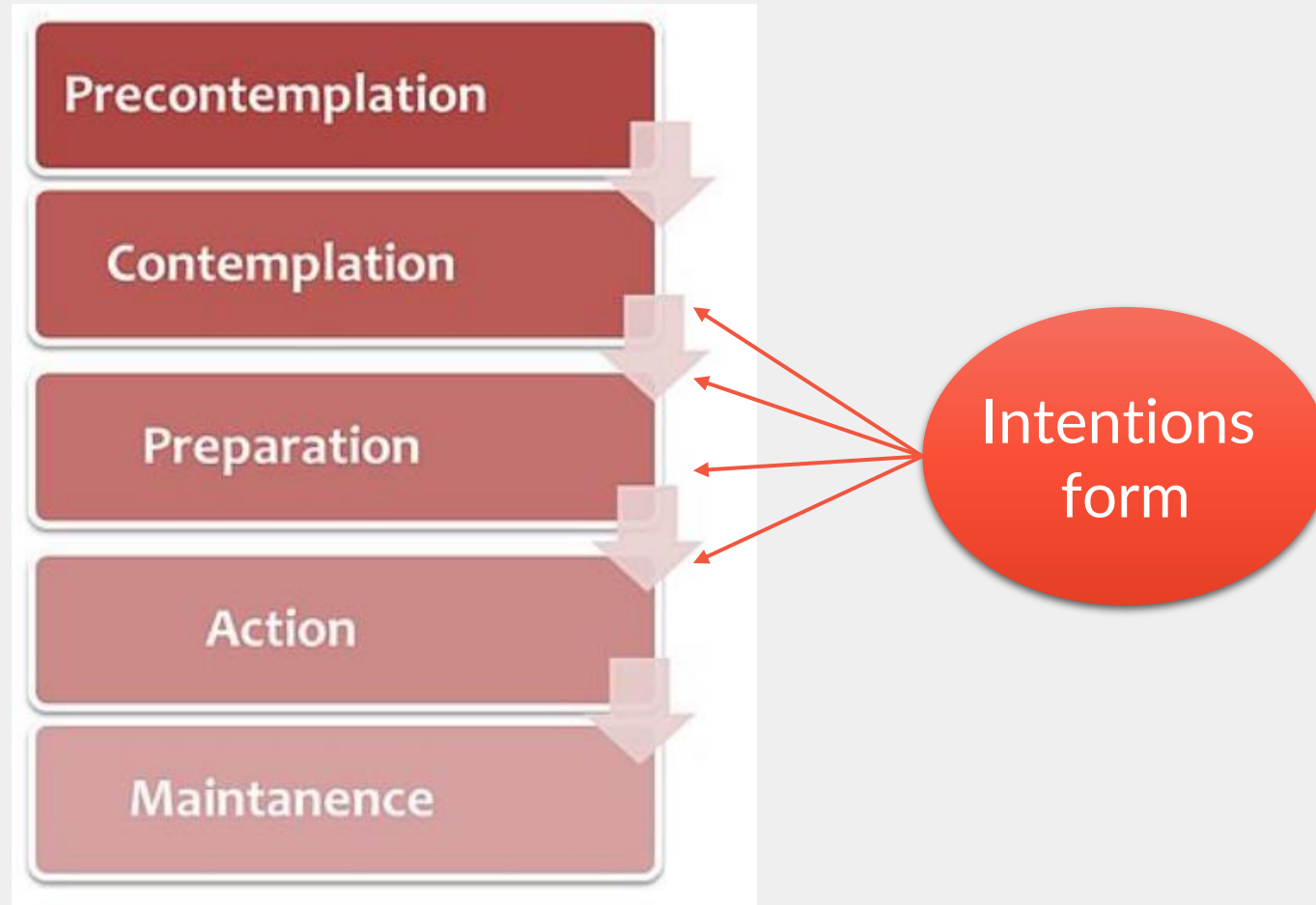
Stages of change



Transtheoretical Model: Prochaska & DiClemente, 1983



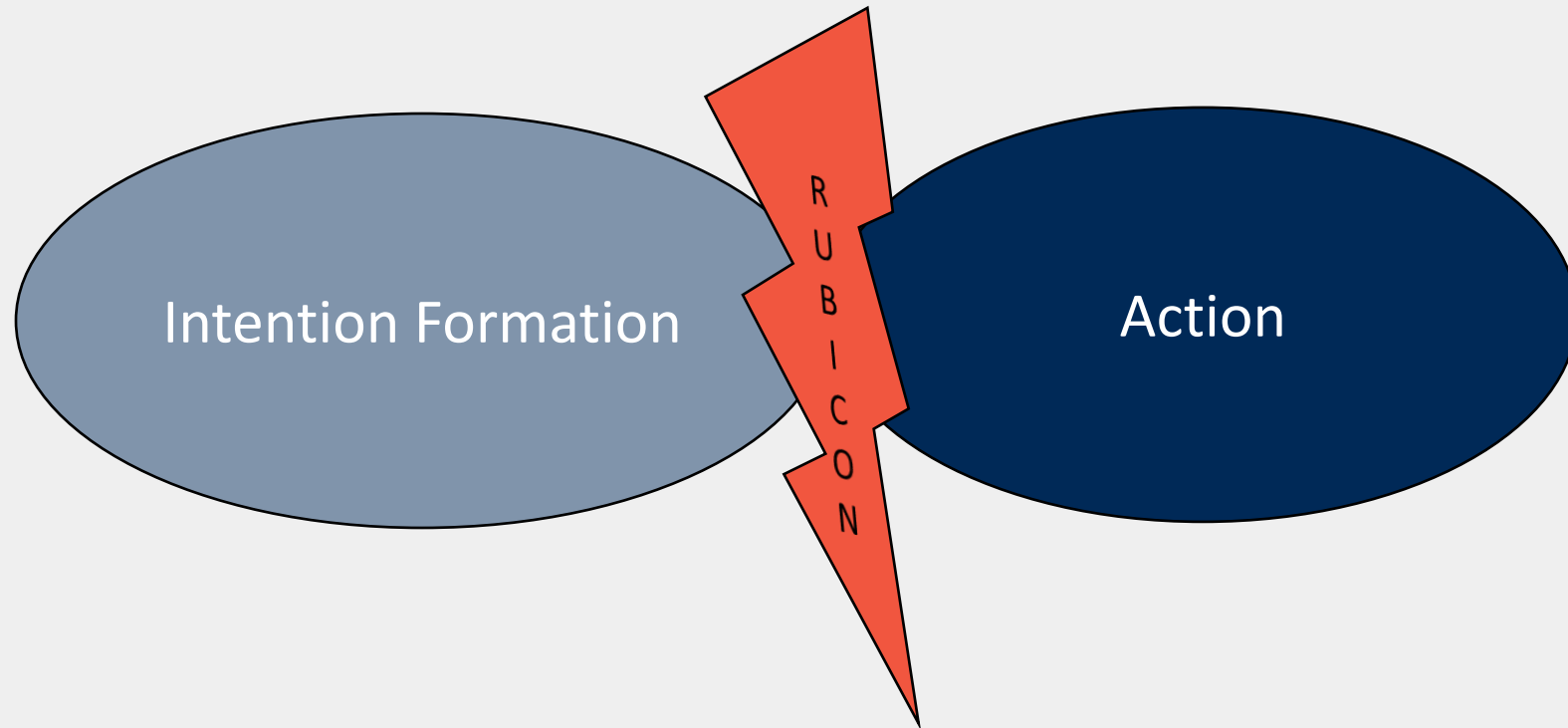
Stages of change



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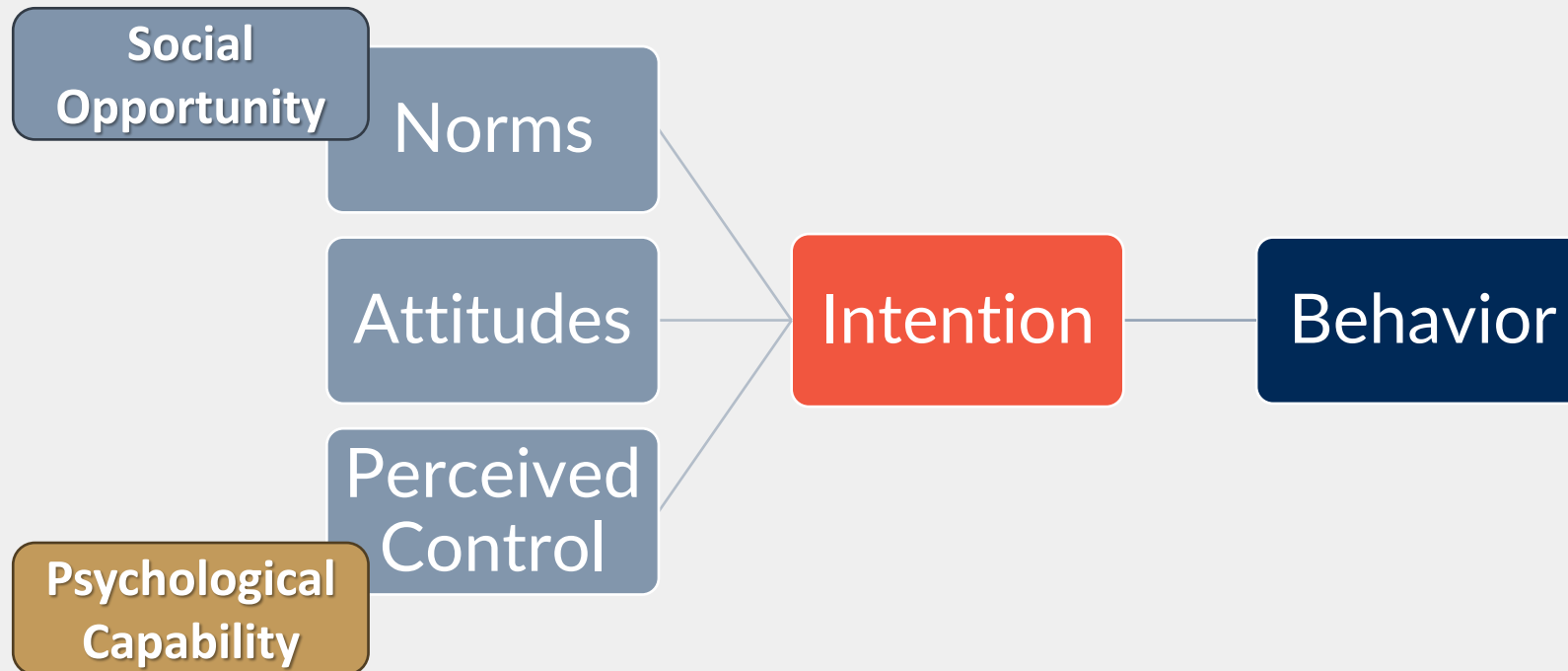
Rubicon Model



Heckhausen & Gollwitzer, 1987

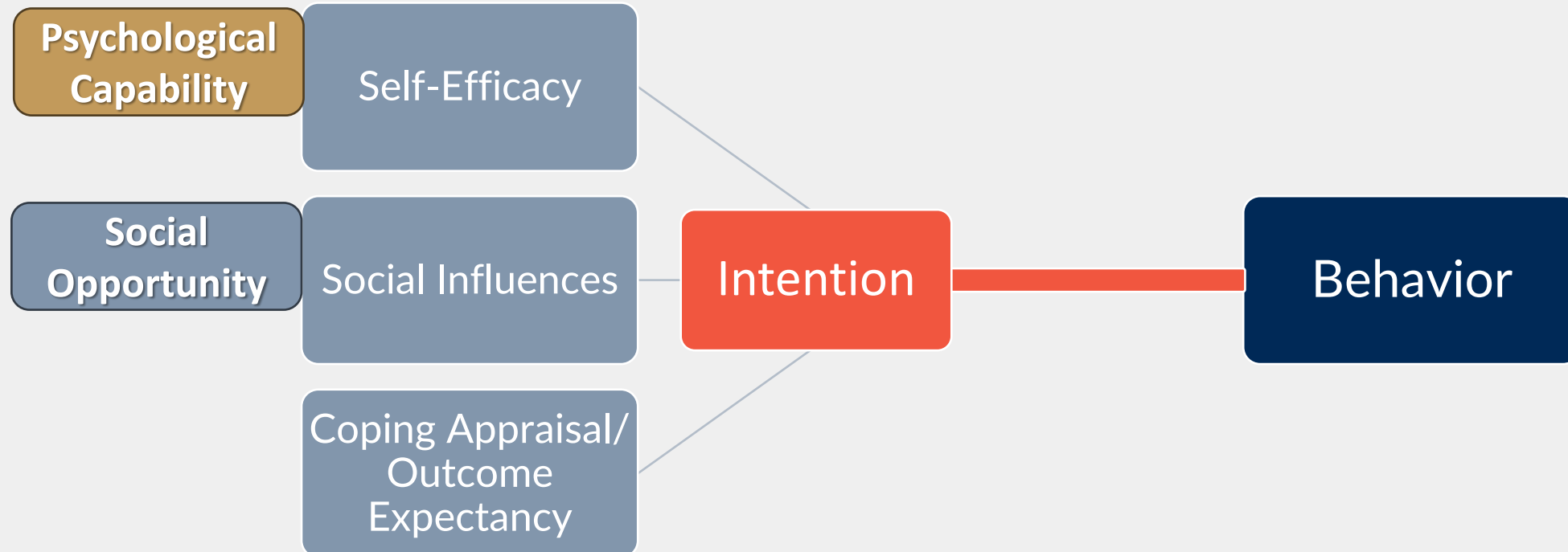


Theory of Planned Behavior



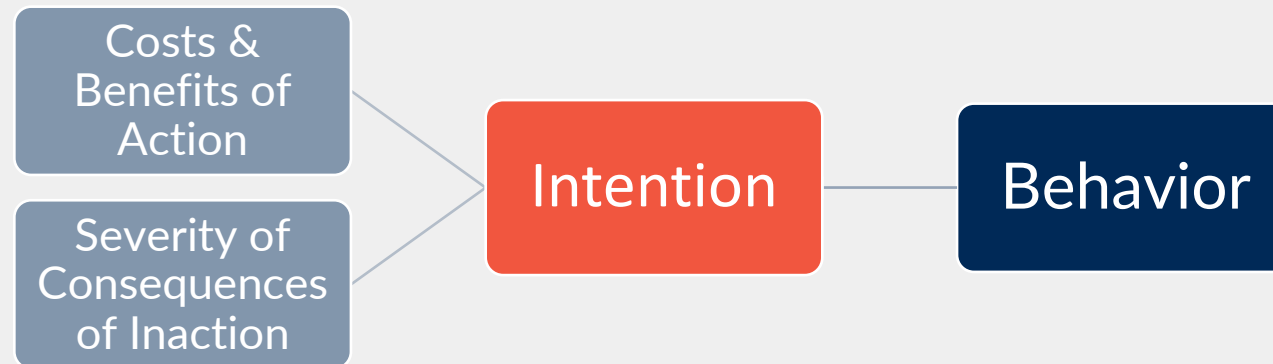


Social Learning Theory



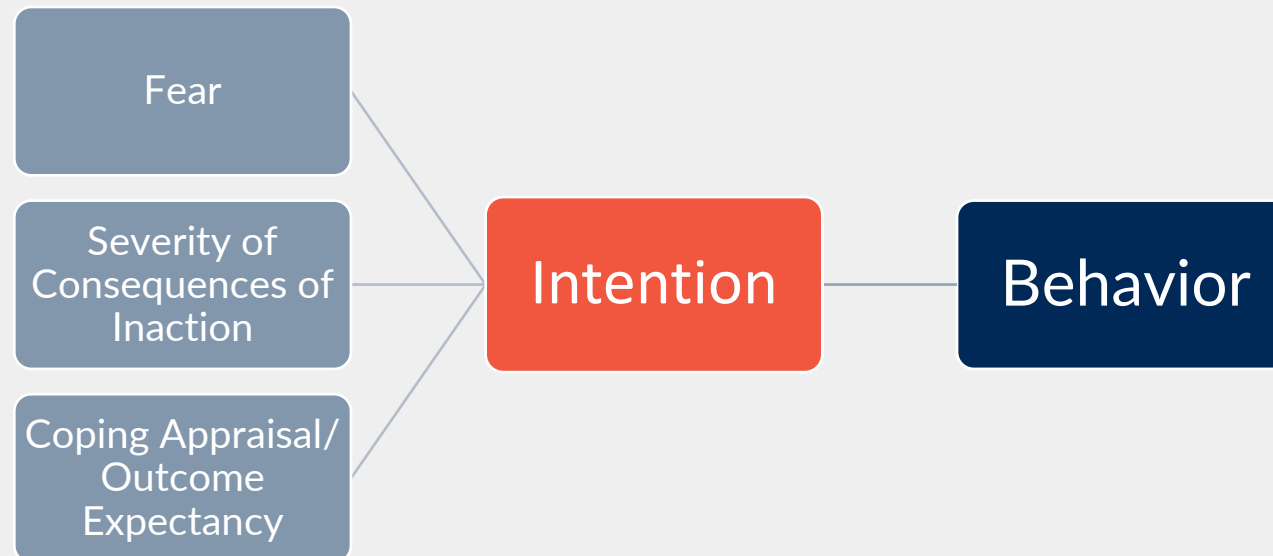


Health Belief Model





Protection Motivation Theory





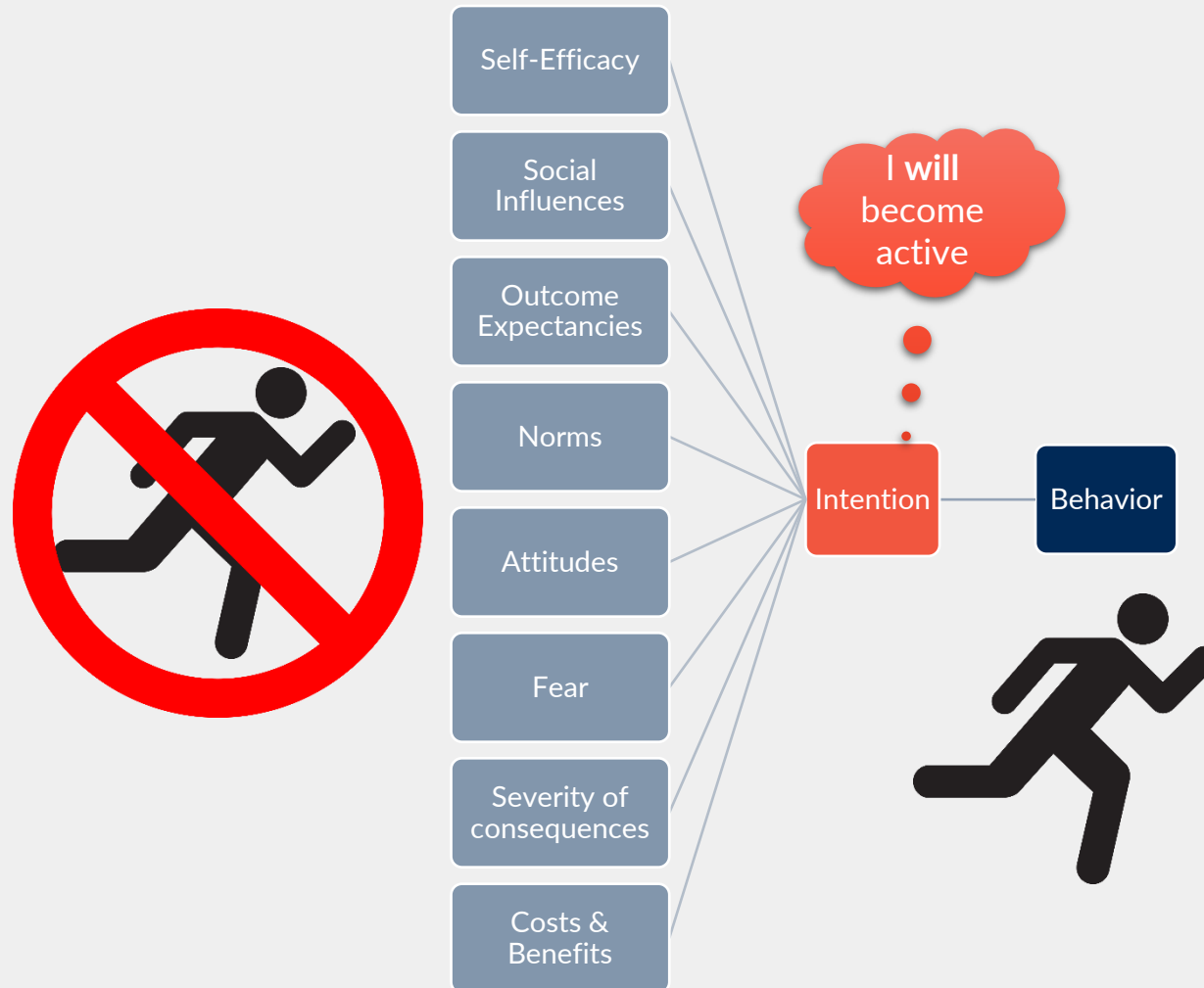
Intention ≠ Behavior

- Intention-centric theories explain about 40% of variance in behavior
- This brings up two questions:
 - What explains the remaining 60% of variance in behavior?
 - How can we bridge the intention-behavior gap?





Behavior change interventions



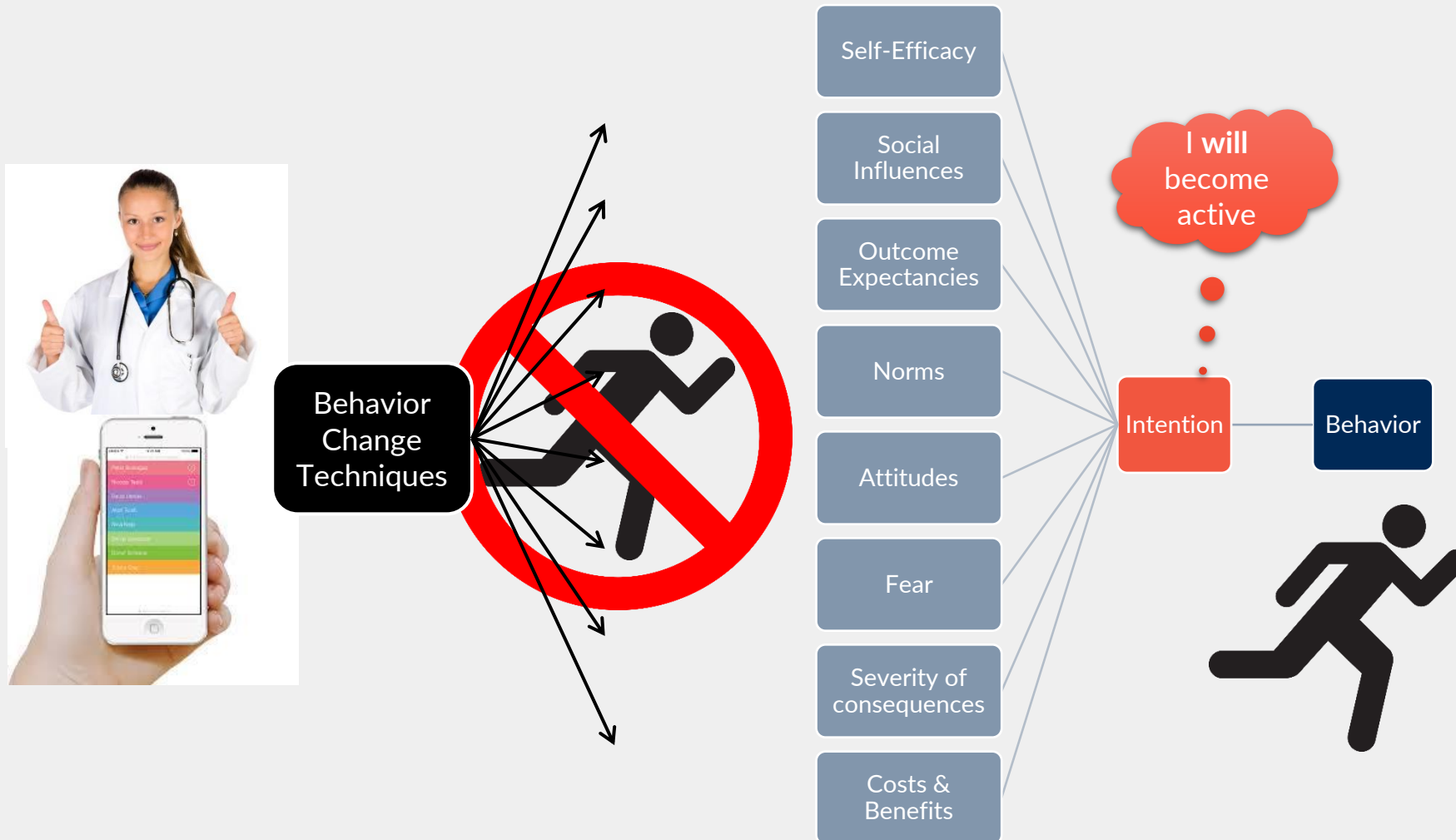


Behavior change interventions



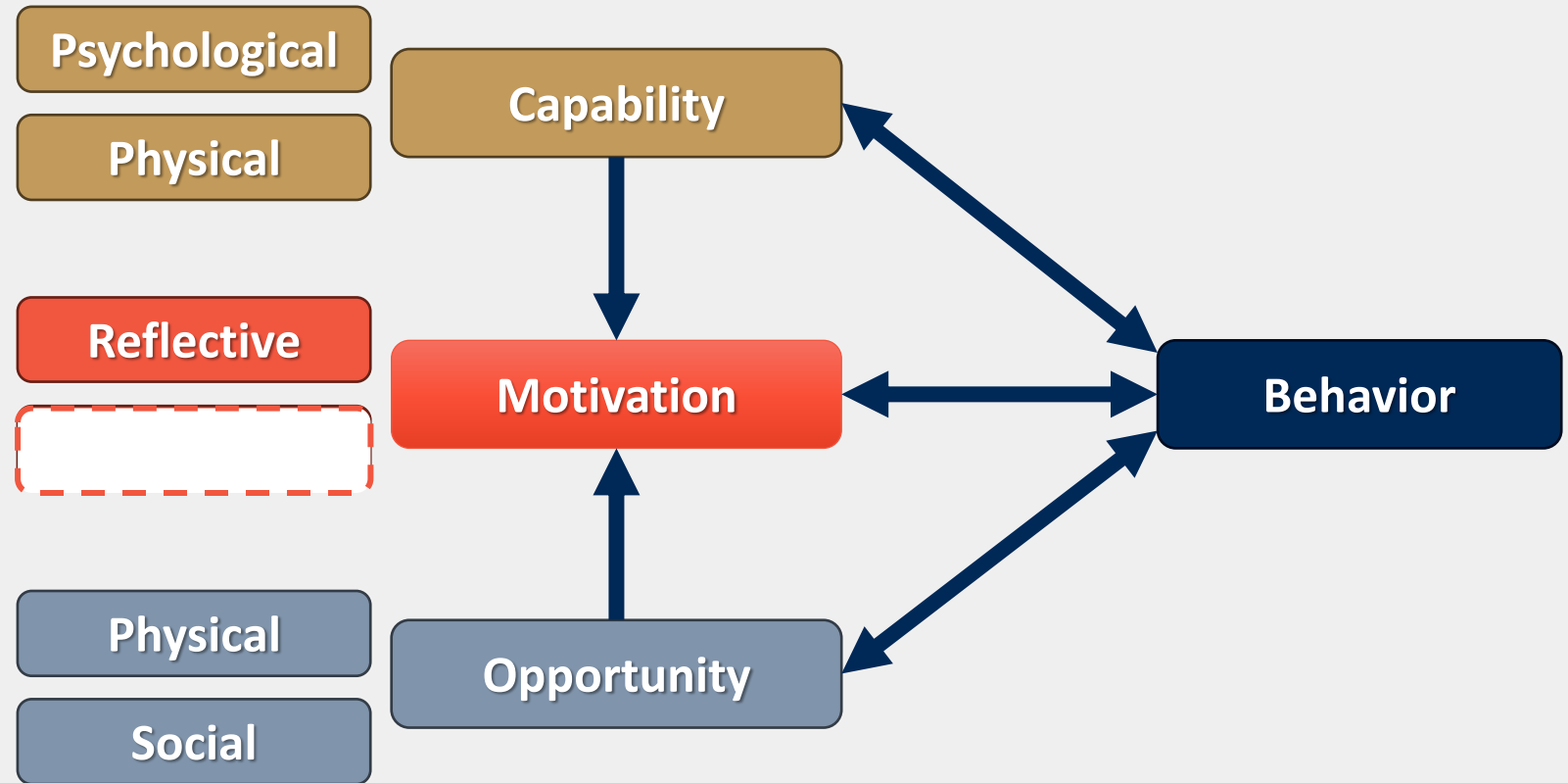


Behavior change interventions



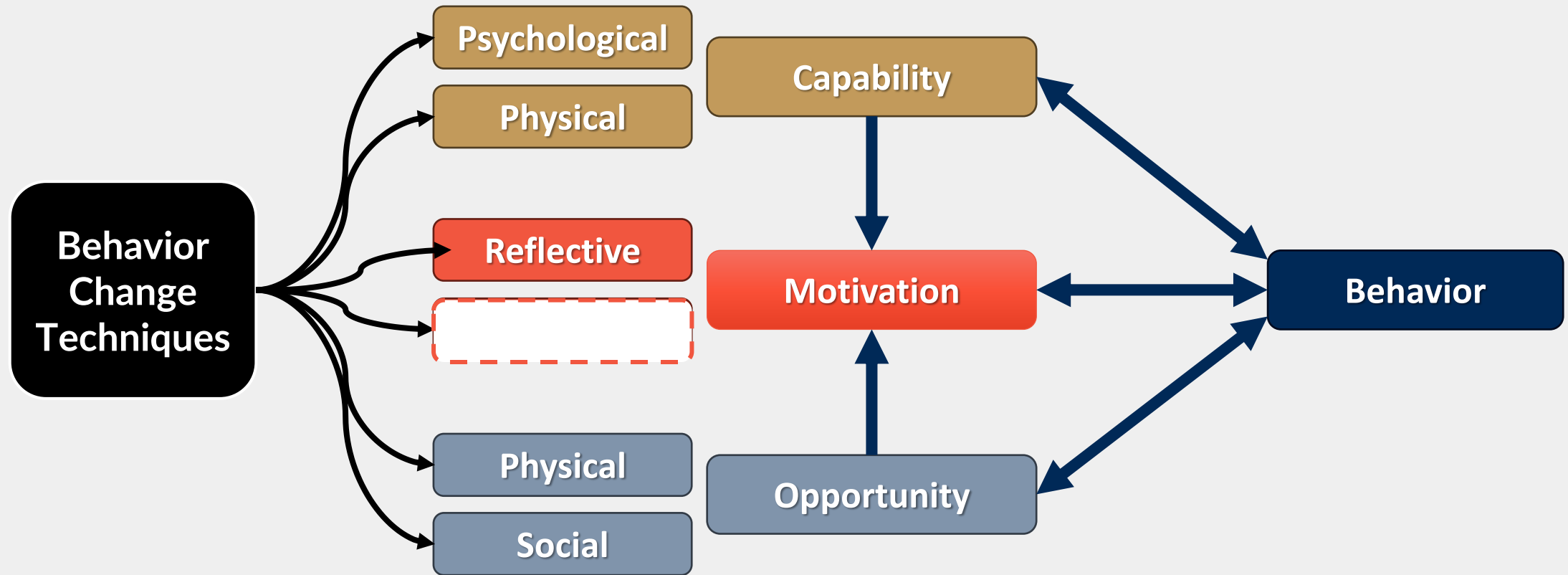


Behavior Change Interventions





Behavior Change Interventions





Behavior change techniques

- The building blocks or ‘active ingredients’ of behavior change interventions

ann. behav. med. (2013) 46:81–95

DOI 10.1007/s12160-013-9486-6

ORIGINAL ARTICLE

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**

- www.bct-taxonomy.com






What BCTs can increase motivation for PA?

HEALTH PSYCHOLOGY REVIEW, 2018
<https://doi.org/10.1080/17437199.2018.1435299>



How can interventions increase motivation for physical activity? A systematic review and meta-analysis

Keegan Knittle ^a, Johanna Nurmi^{a,b}, Rik Crutzen ^c, Nelli Hankonen ^{a,d},
Marguerite Beattie^a and Stephan U Dombrowski^e

^aDepartment of Social Research – Social Psychology, University of Helsinki, Helsinki, Finland; ^bBehavioural Science Group, Institute of Public Health, University of Cambridge, Cambridge, UK; ^cDepartment of Health Promotion, Maastricht University/CAPHRI, Maastricht, Netherlands; ^dFaculty of Social Sciences, University of Tampere/Linna, Tampere, Finland; ^eFaculty of Natural Sciences, Division of Psychology, University of Stirling, Stirling, UK

OSF: <https://osf.io/2fqr3/>



Results – Descriptives

- 89 studies, 200 treatment arms
 - 77 arms data on intention to be PA
 - 96 arms data on stage of change for PA
 - 34 arms data on autonomous motivation for PA

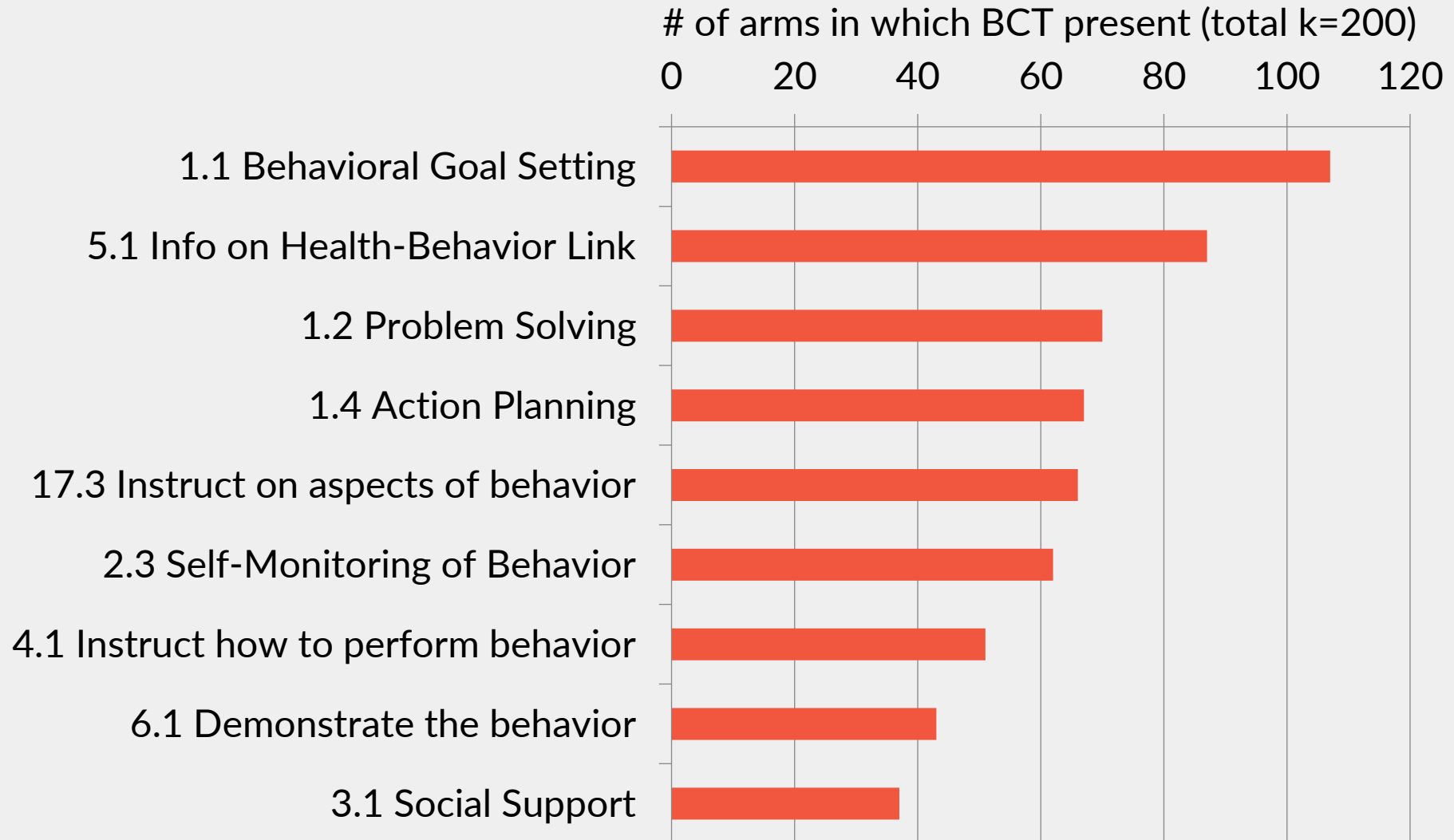


Results – Descriptives

- 89 studies, 200 treatment arms
 - 77 arms data on intention to be PA
 - 96 arms data on stage of change for PA
 - 34 arms data on autonomous motivation for PA
- Modes of Delivery (of active arms)
 - 65% had a face to face component
 - 61% had paper based component
 - 33% had group setting
 - 28% had Internet/Mobile component



Most frequently used BCTs





Results

- Associated with 2 motivational outcomes:

1.1
Behavioral Goal
Setting

1.2
Problem
Solving

2.3
Self-monitoring
of behavior



Results

- Associated with 2 motivational outcomes:

1.1
Behavioral Goal
Setting

1.2
Problem
Solving

2.3
Self-monitoring
of behavior

6.1
Demonstration
of the behavior

8.1
Behavioral
Practice

**Face to Face
Delivery**

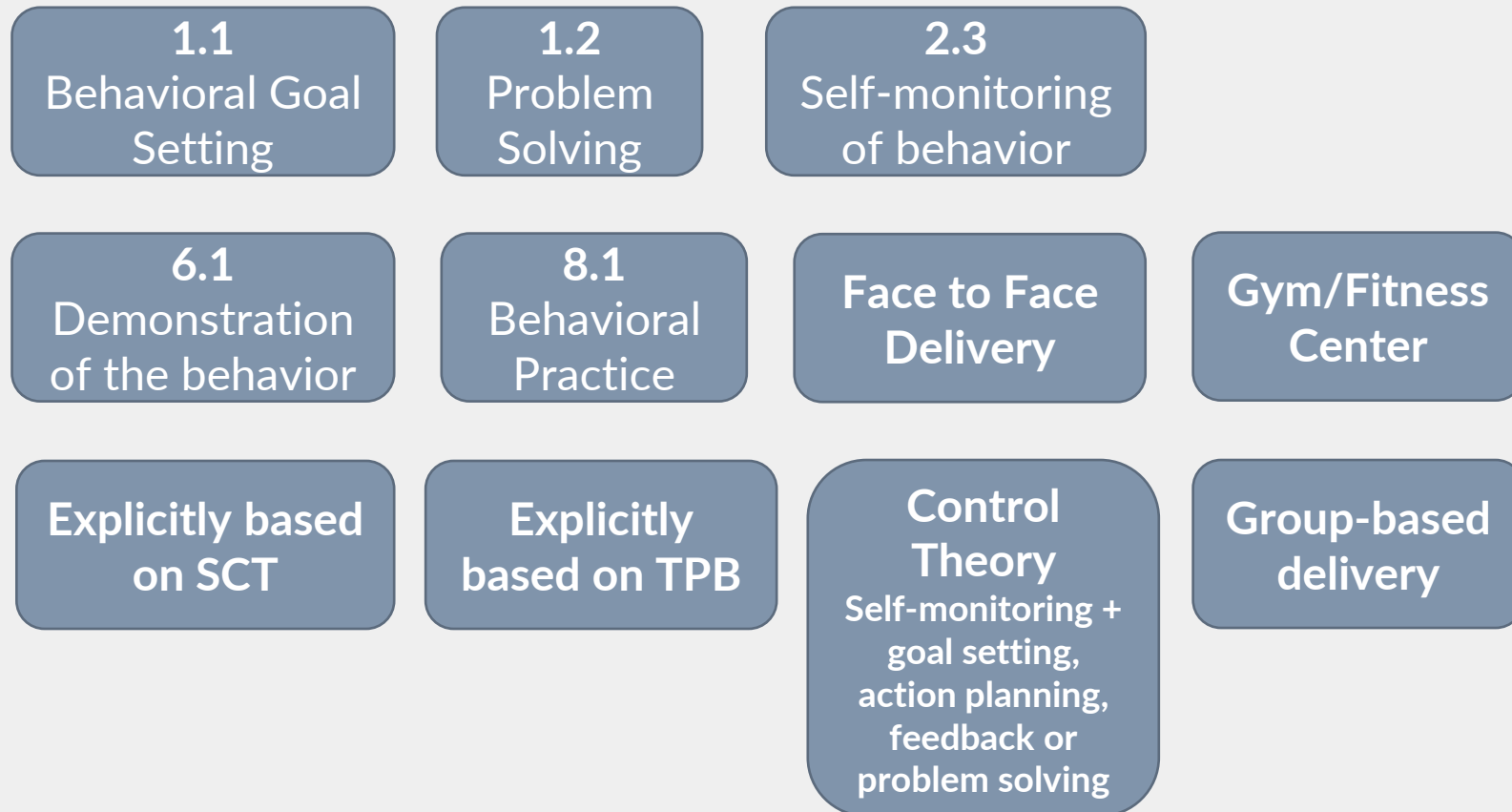
**Gym/Fitness
Center**

**Group-based
delivery**



Results

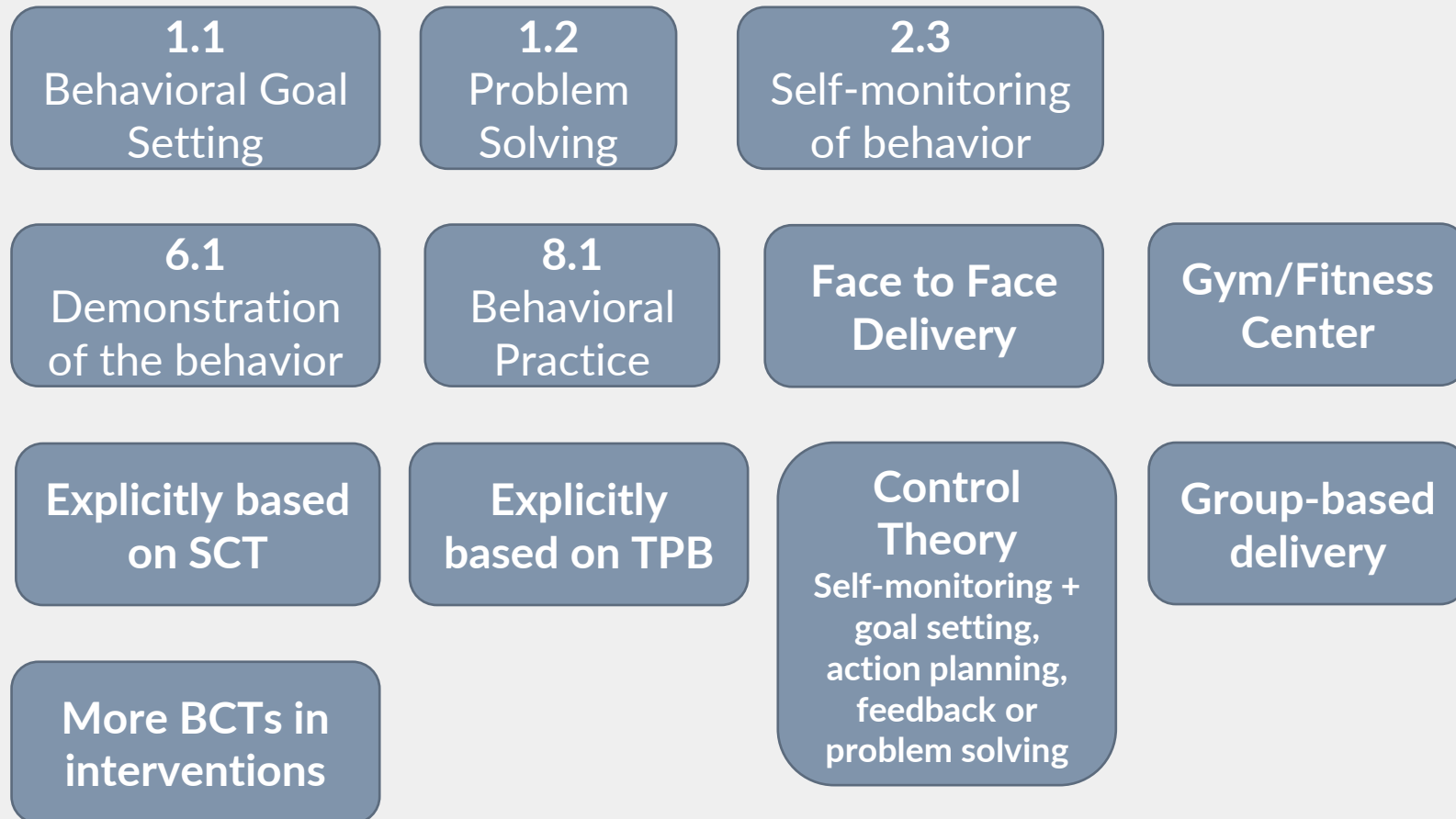
- Associated with 2 motivational outcomes:





Results

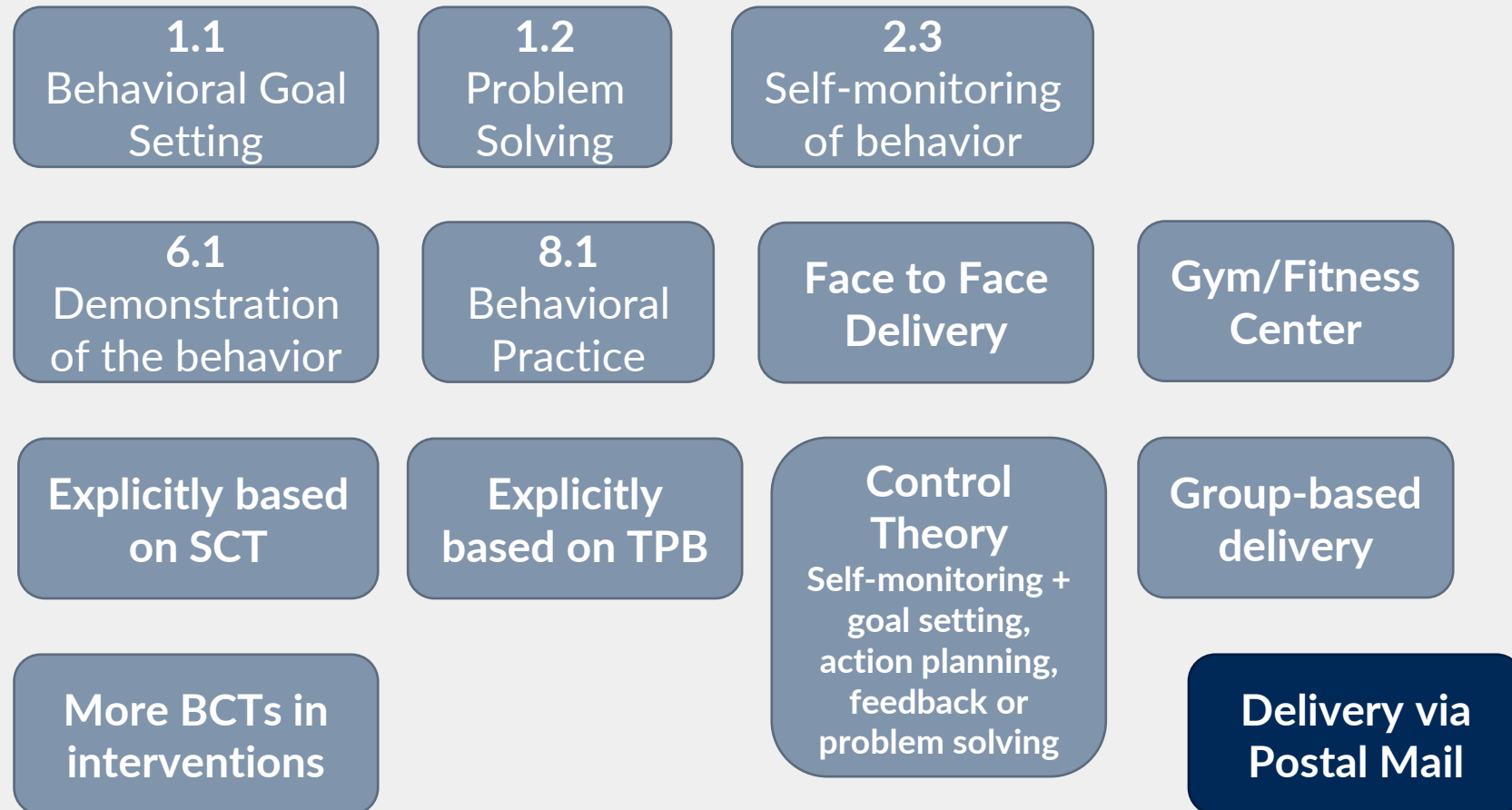
- Associated with 2 motivational outcomes:





Results

- Associated with 2 motivational outcomes:





Intention ≠ Behavior

- Intention-centric theories explain about 40% of variance in behavior
- This brings up two questions:
 - What explains the remaining 60% of variance in behavior?
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How can we bridge the intention – behavior gap?



Control Theory aka Self-Regulation Theory



Carver & Scheier
(1982, 2001, 2012)



Self-monitoring

- Track what one is actually doing



2.3	<i>Self-monitoring of behavior</i>	Establish a method for the person to monitor and record their behavior(s) as part of a behavior change strategy <i>Note: if monitoring is part of a data collection procedure rather than a strategy aimed at changing behavior, do not code; if monitoring of outcome of behavior, code 2.4, Self-monitoring of outcome(s) of behavior; if monitoring is by someone else (without feedback), code 2.1, Monitoring of behavior by others without feedback</i>	Ask the person to record daily, in a diary, whether they have brushed their teeth for at least two minutes before going to bed Give patient a pedometer and a form for recording daily total number of steps
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Goal setting

- Set a behavioral goal to close the gap
 - Base on reality



1.1	Goal setting (behavior)	Set or agree on a goal defined in terms of the behavior to be achieved <i>Note: only code goal-setting if there is sufficient evidence that goal set as part of intervention; if goal unspecified or a behavioral outcome, code 1.3, Goal setting (outcome); if the goal defines a specific context, frequency, duration or intensity for the behavior, <u>also</u> code 1.4, Action planning</i>	Agree on a daily walking goal (e.g. 3 miles) with the person and reach agreement about the goal Set the goal of eating 5 pieces of fruit per day as specified in public health guidelines
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SMART Goals

S



Specific

M



Measurable

A



Attainable

R



Relevant

T



Time Based



Action planning

- Specifying when, where and how to act



1.4	Action planning	<p>Prompt detailed planning of performance of the behavior (must include at least one of context, frequency, duration and intensity). Context may be environmental (physical or social) or internal (physical, emotional or cognitive) (includes <u>Implementation Intentions</u>)</p> <p><i>Note: evidence of action planning does not necessarily imply goal setting, only code latter if sufficient evidence</i></p>	<p>Encourage a plan to carry condoms when going out socially at weekends</p> <p>Prompt planning the performance of a particular physical activity (e.g. running) at a particular time (e.g. before work) on certain days of the week</p>
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Problem solving

- Identifying barriers to goal achievement and ways to overcome them.



If ..., Then

1.2	Problem solving	Analyse , or prompt the person to analyse, factors influencing the behavior and generate or select strategies that include overcoming barriers and/or increasing facilitators (includes ' Relapse Prevention ' and ' Coping Planning ') <i>Note: barrier identification without solutions is not sufficient. If the BCT does not include analysing the behavioral problem, consider 12.3,</i> Avoidance/changing exposure to cues for the behavior, 12.1, Restructuring the physical environment, 12.2, Restructuring the social environment, or 11.2, Reduce negative emotions	Identify specific triggers (e.g. being in a pub, feeling anxious) that generate the urge/want/need to drink and develop strategies for avoiding environmental triggers or for managing negative emotions, such as anxiety, that motivate drinking Prompt the patient to identify barriers preventing them from starting a new exercise regime e.g., lack of motivation, and discuss ways in which they could help overcome them e.g., going to the gym with a buddy
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Feedback

- Compare behavior with goal or some other standard.

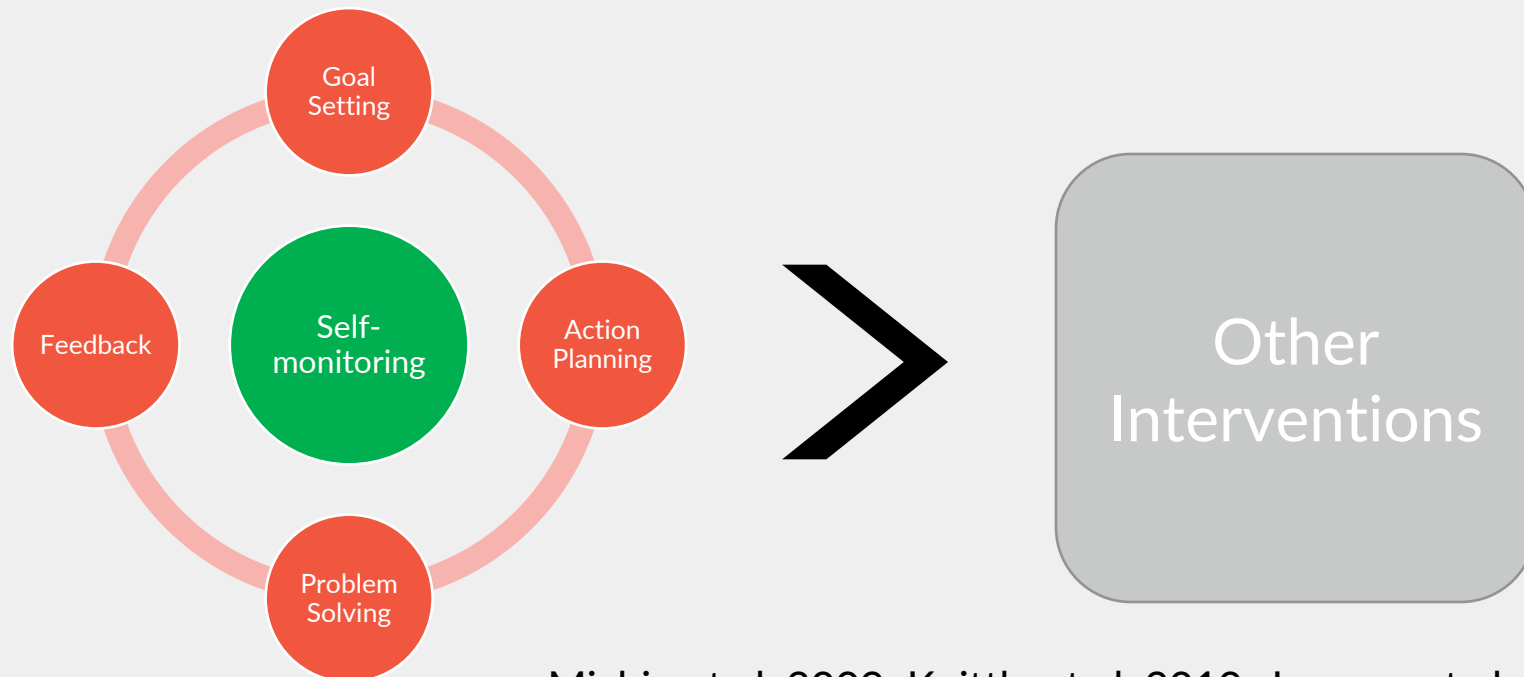


2.2	Feedback on behavior	Monitor and provide informative or evaluative feedback on performance of the behavior (e.g. form, frequency, duration, intensity) <i>Note: if Biofeedback, code only 2.6, Biofeedback and not 2.2, Feedback on behavior; if feedback is on outcome(s) of behavior, code 2.7, Feedback on outcome(s) of behavior; if there is no clear evidence that feedback was given, code 2.1, Monitoring of behavior by others without feedback; if feedback on behaviour is evaluative e.g. praise, also code 10.4, Social reward</i>	Inform the person of how many steps they walked each day (as recorded on a pedometer) or how many calories they ate each day (based on a food consumption questionnaire).
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Control Theory Techniques

- From meta-analyses: Strongly associated with changes in behavior
 - Diet, Physical Activity, Anxiety, Depression, Self-efficacy
- Also strongly associated with increases in motivation!



Michie et al, 2009; Knittle et al, 2010; Janssen et al, 2012;
Dombrowski et al, 2012; Olander et al, 2013; Knittle et al 2018



COM-B

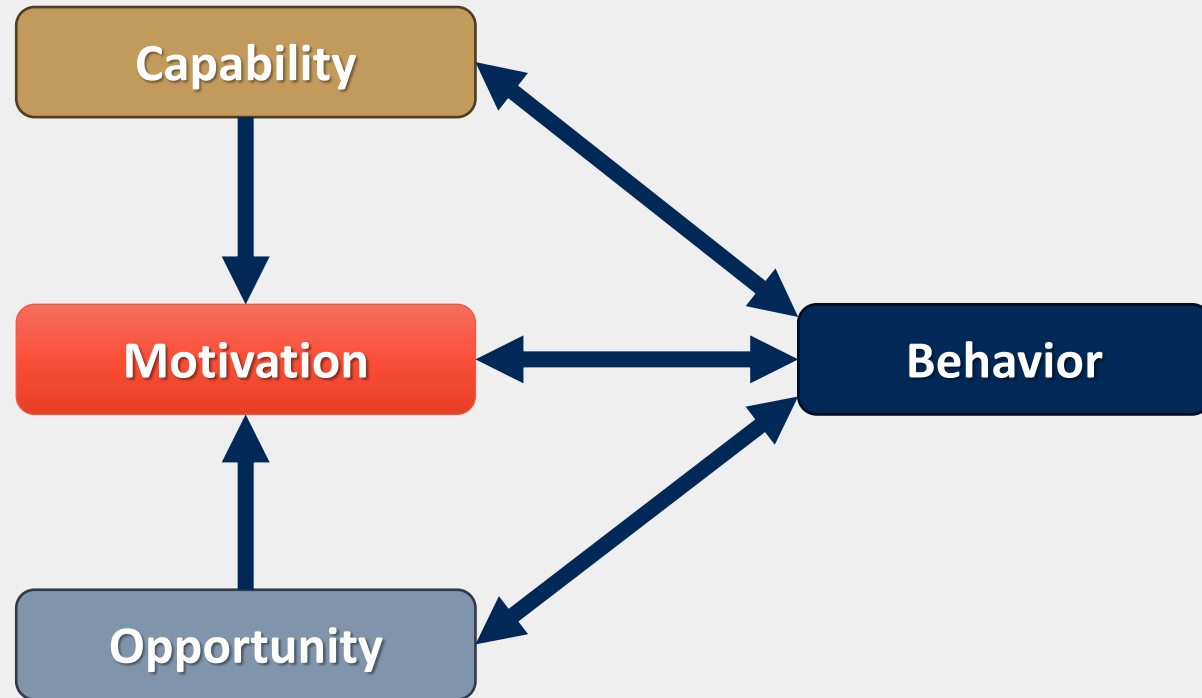
Psychological

Physical

Reflective

Physical

Social





COM-B

Psychological

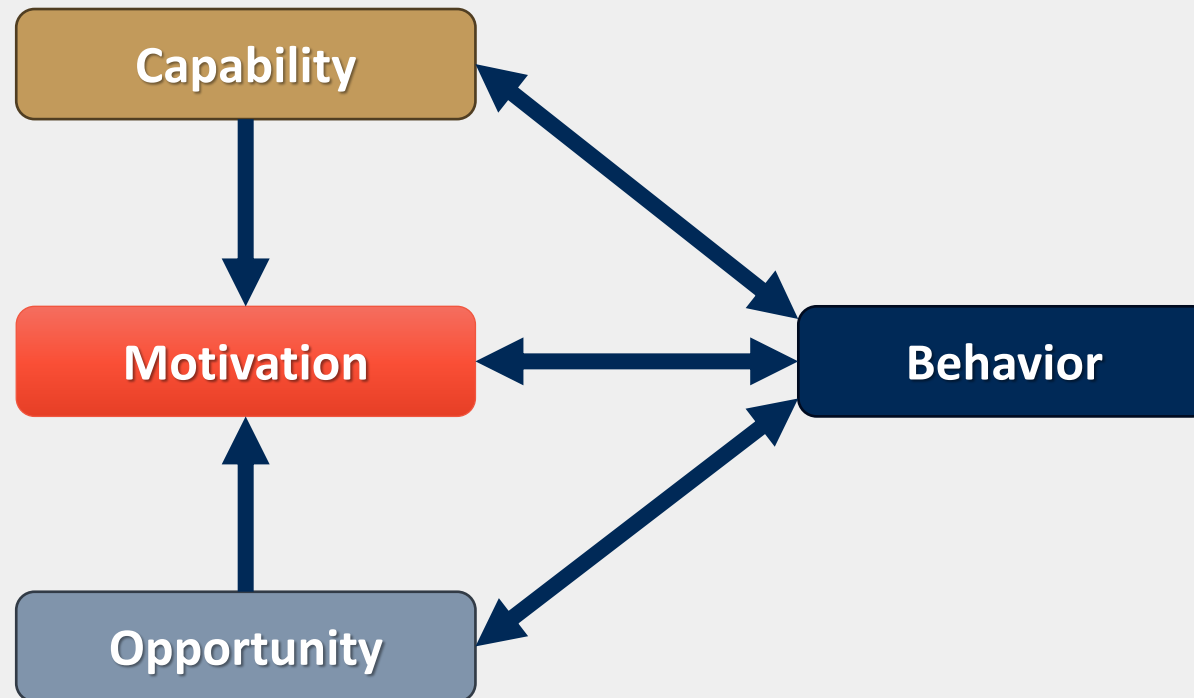
Physical

Reflective

Automatic

Physical

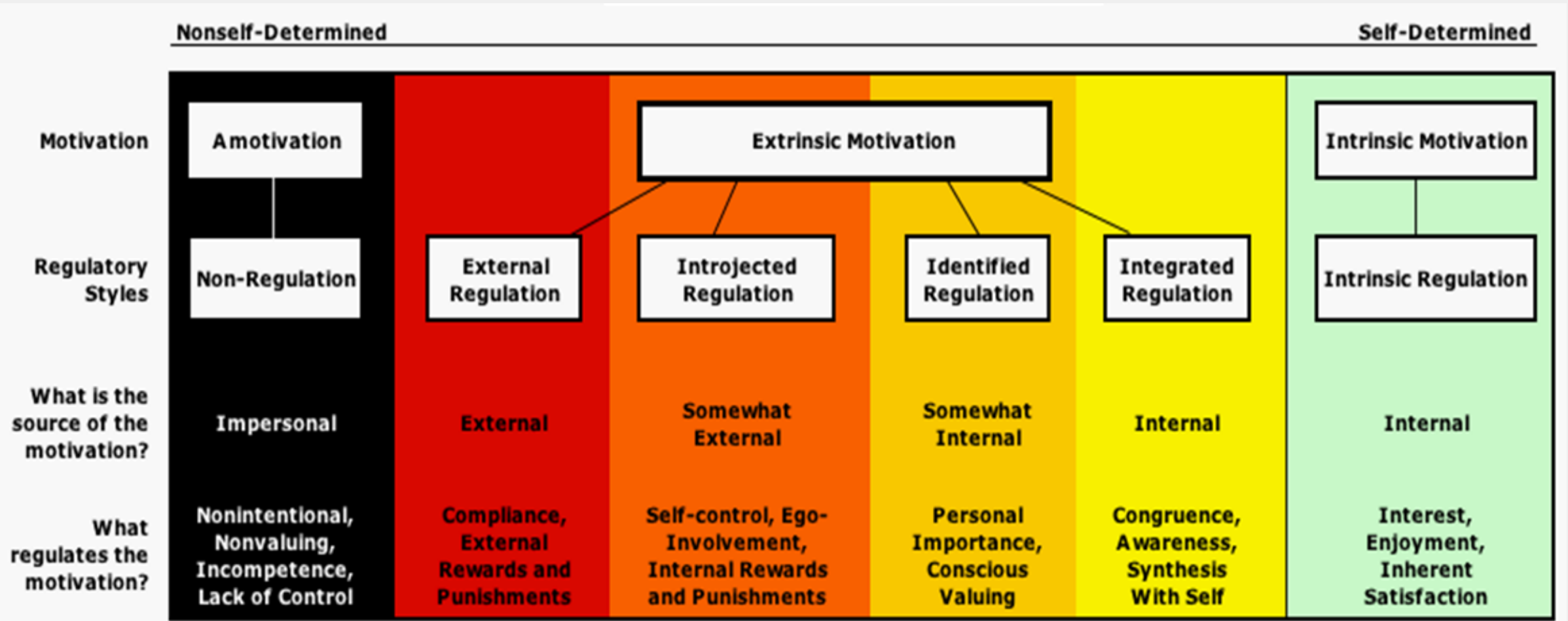
Social



**What explains the
remaining 60% of
variance in behavior?**



Self-determination theory

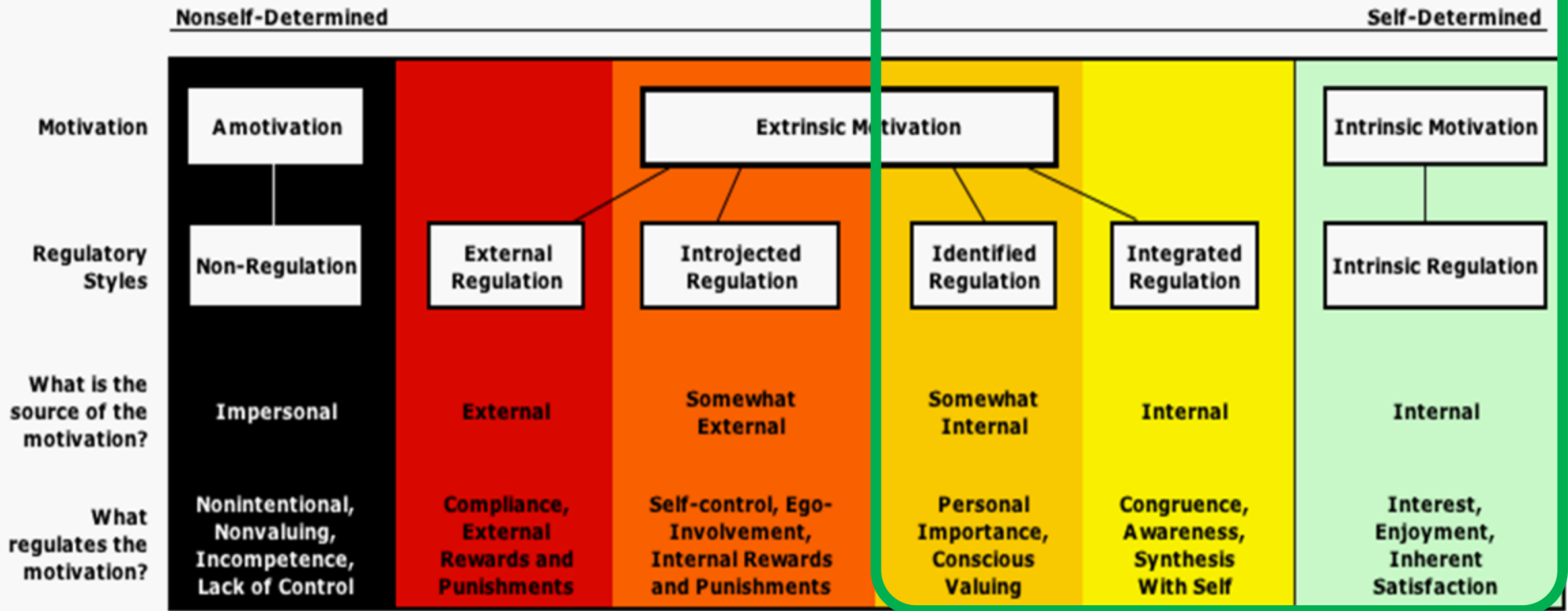


(Based on Ryan, R.M. & Deci, E.L. (2000). *Self-Determination Theory and the Facilitation of Intrinsic Motivation, Social Development, and Well-Being*. *American Psychologist*. 55(1), 68-78.)



Self-determination theory

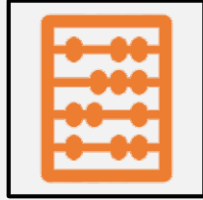
Autonomous Forms of Motivation



(Based on Ryan, R.M. & Deci, E.L. (2000). *Self-Determination Theory and the Facilitation of Intrinsic Motivation, Social Development, and Well-Being*. *American Psychologist*. 55(1), 68-78.)



Autonomous Motivation = Good!



Predicts behavioral maintenance,
task persistence



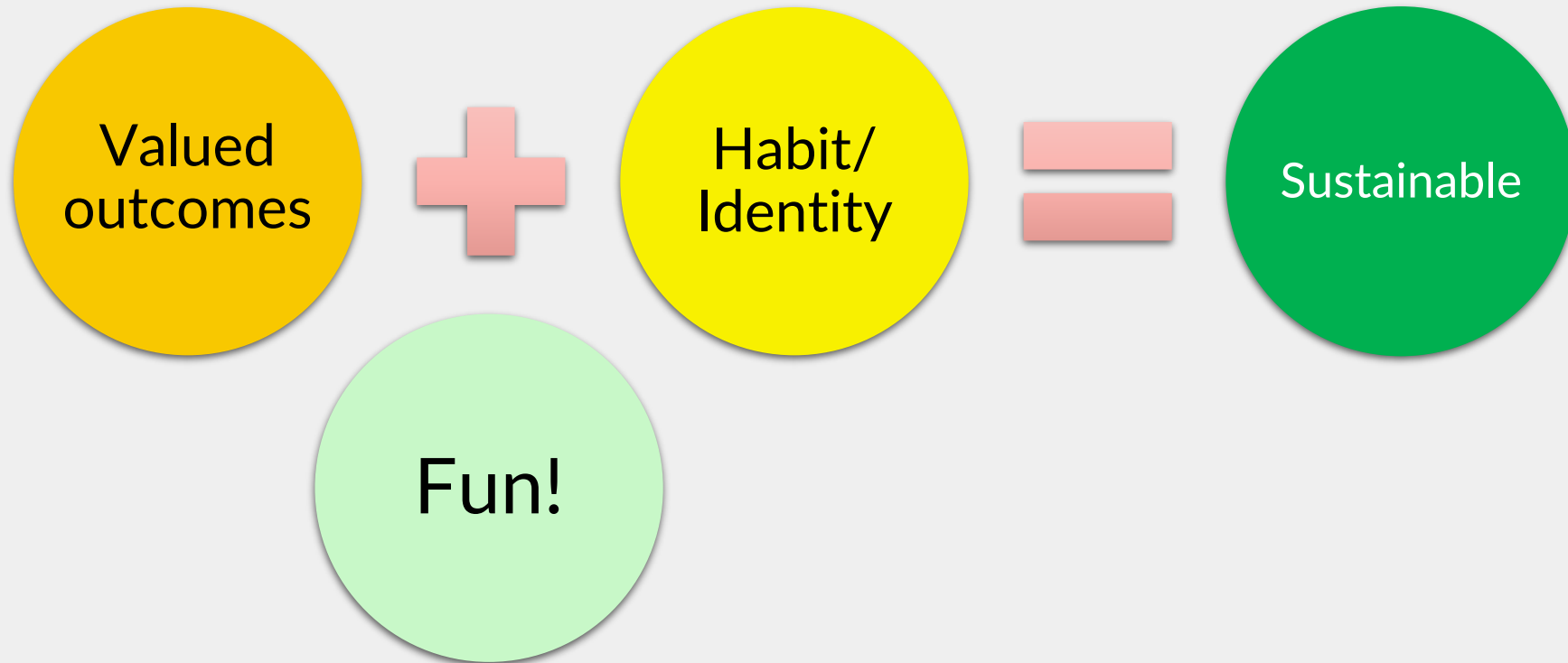
Predicts performance



Predicts well-being



Keeping behavior going



Amotivation

Extrinsic
Motivation

Intrinsic
Motivation

Non-Regulation

External
Regulation

Introjected
Regulation

Identified
Regulation

Integrated
Regulation

Intrinsic
Regulation

Six regulatory styles

Internalisation and Integration

Basic
Psychosocial
Needs

RELATEDNESS

Enhanced by

- Respect, caring
- Inclusive environment
- Security

Undermined by

- Competition
- Criticism
- Cliques, traditions

COMPETENCE

Enhanced by

- Optimal challenge
- Positive performance feedback

Undermined by

- Excessive challenge
- Negative performance feedback

AUTONOMY

Enhanced by

- Choice
- Explanation / rationale
- Acknowledgement of feelings

Undermined by

- Tangible rewards
- Threats, deadlines
- Imposed goals, control



Habit

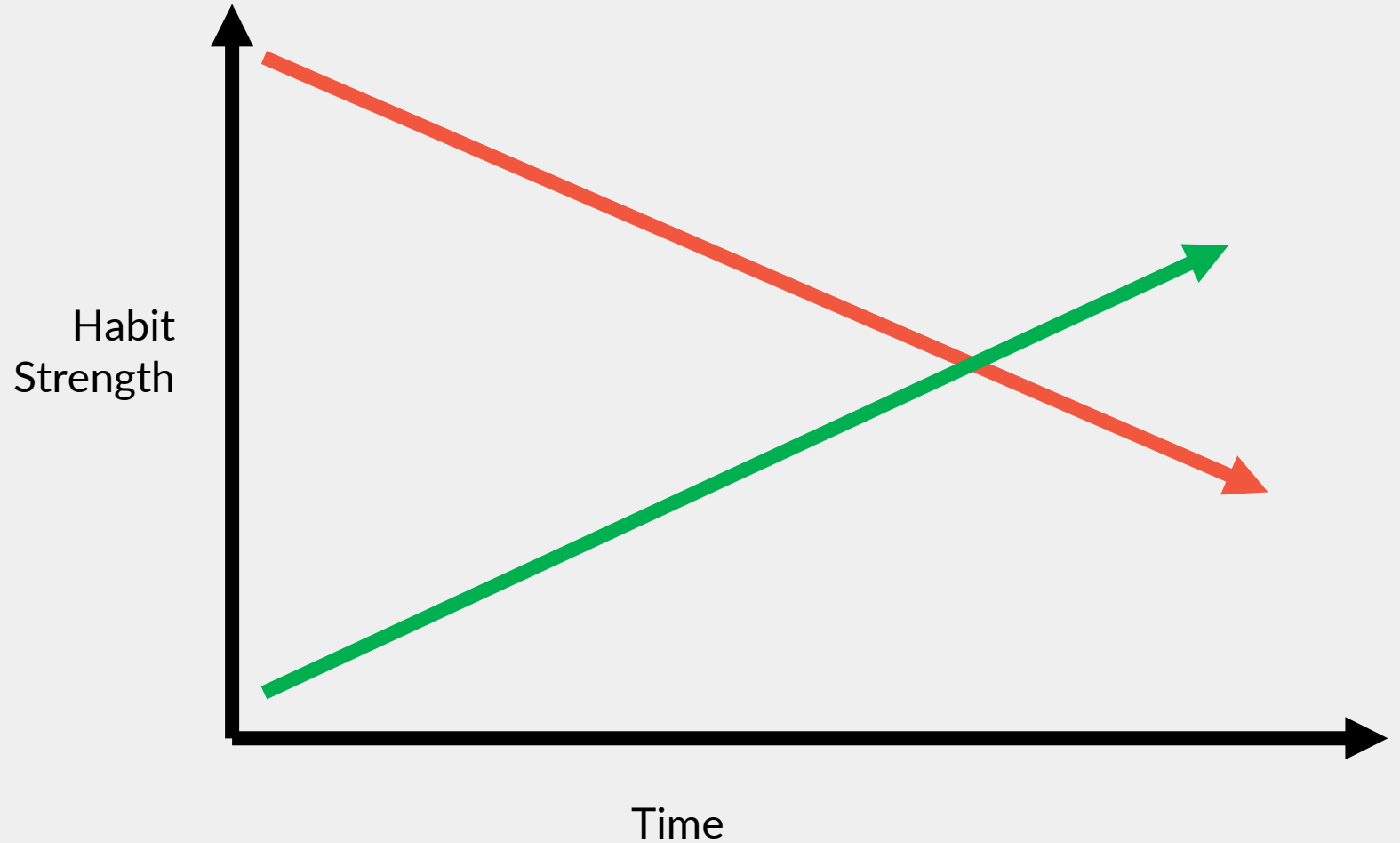
- An established ongoing behavioral pattern
 - Cue/situation → Response
- Example: To snooze? Or not to snooze?
- Habit strength = a measure of how deeply embedded a behavioral pattern is
- Lack of PA is a strong habit for many





Habit Growth & Extinction

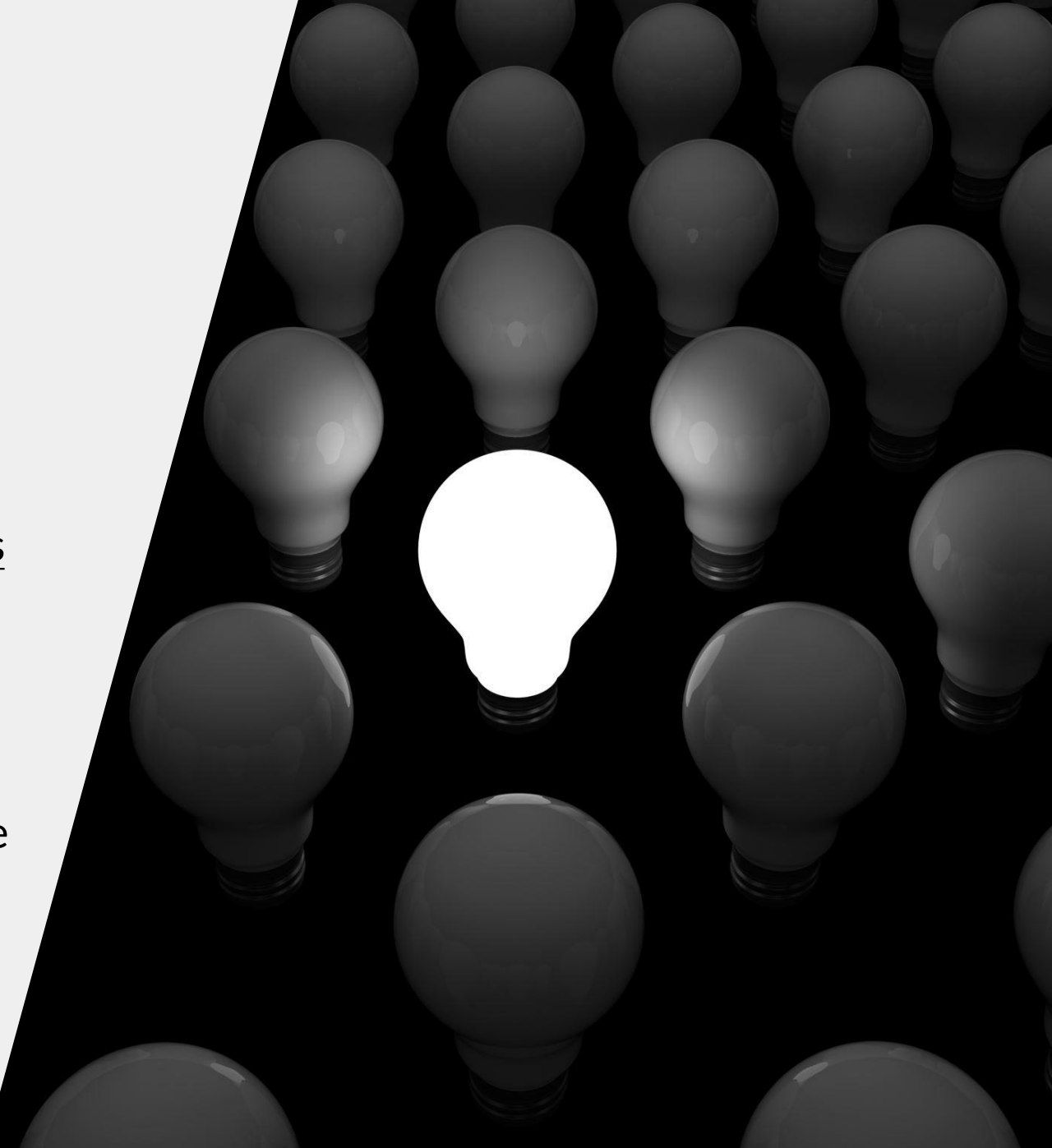
- To strengthen new habits, old ones need to fade away
- PA takes time to embed itself, as new habit strengthens





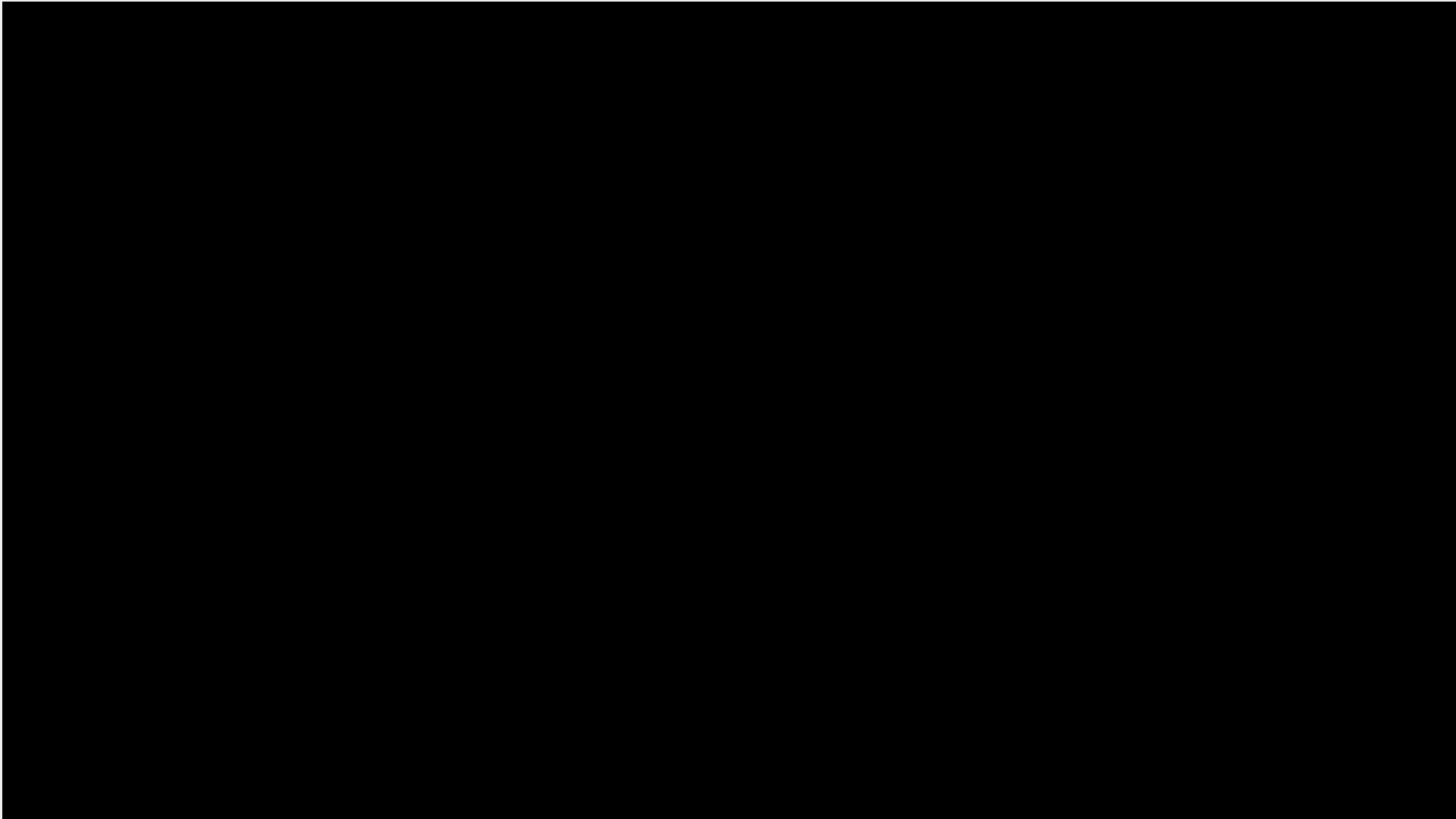
Habit is an Automatic Process

- Habit predicts behavior beyond motivation or intention
- Habit is an example of an automatic process
 - I.e. effortless.
 - See cue --> Do action
- Automatic routes to behavior change can be very powerful





What would you do?



<https://www.youtube.com/watch?v=2IXh2n0aPyw>



Summary

- Capability, Opportunity and Motivation precede Behavior (COM-B)
 - But motivation alone is not enough
- Self-regulation helps turn motivation into action
 - And increases motivation for physical activity!
- Physical activity most likely to be maintained if it is:
 - Fun, a part of one's Identity, a Habit, and leads to Valued Outcomes

