

Who is in control? The development of a model for communicating health information

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Background: The aim of this research was to examine variables that influence attention to health information in order to develop a predictive model. **Methods:** Community participants ($N = 330$) were randomly assigned to one of two conditions presenting information about coronary heart disease (CHD) or road accidents. Information was either risk or neutral in valency. Attention to information was measured using a surprise recall task. Other variables measured included perceived risk, optimism, control and coping strategies. **Findings:** Overall, participants in the CHD condition remembered significantly more risk information than participants in the road condition. Participants in the road condition endorsed significantly lower beliefs in personal control perceptions while also endorsing greater beliefs in other's control over their own road outcomes. **Discussion:** While perceived control is usually emphasised as integral in adopting protective behaviours these findings suggest that they are also central in communicating health information.

Differences in cost-effectiveness in tailored interventions to promote physical activity among the over fifties

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Background: Four tailored interventions were developed to stimulate physical activity (PA) among persons aged over fifty and evaluated on cost-effectiveness. Interventions varied in delivery channel (web-based or printed) and the amount of local information. **Methods:** Interventions were evaluated in an RCT, and analysed using linear regression analyses. Main outcomes are (six months) changes in PA, quality of life (QoL) and intervention costs. **Findings:** Response to the web-based intervention was lower (11.8% vs. 18.5%) and dropout was higher (70.7% vs. 49.9%) than in the print-delivered intervention. All interventions were equally effective in increasing PA. Participants' QoL did not improve. Adding local information resulted in a less positive cost-effectiveness, since effects are equal while intervention costs increased. Costs per participant were lower in the web-based condition compared to the print-delivered intervention. **Discussion:** Since effects are equal, cost-effectiveness depends on the number of participants (response and dropout) as well on the sustainability of the effects.

Modelling adjustment in spinal cord injury: the role of psychological resources

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