

## Behaviour change overview

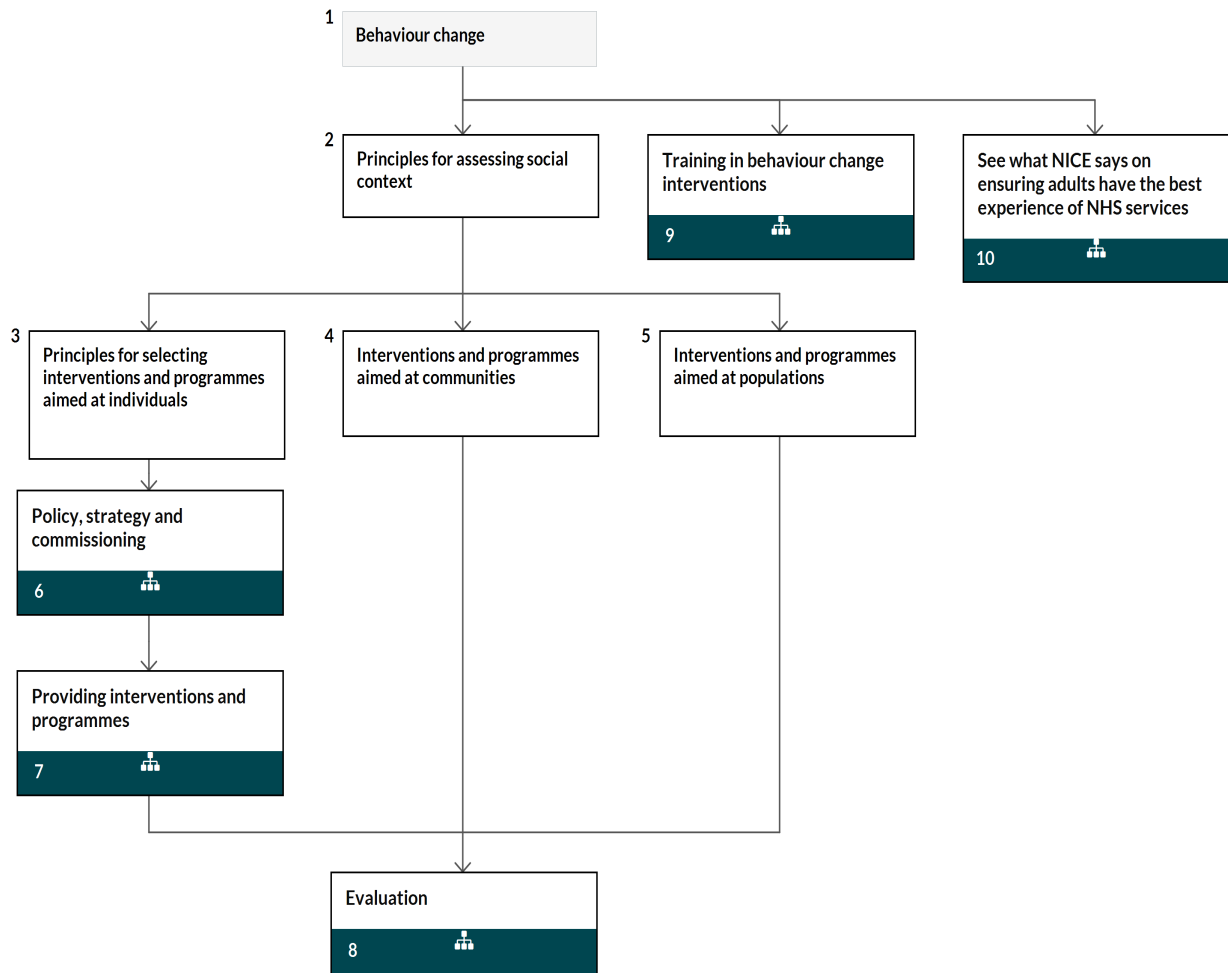
NICE Pathways bring together everything NICE says on a topic in an interactive flowchart. NICE Pathways are interactive and designed to be used online.

They are updated regularly as new NICE guidance is published. To view the latest version of this NICE Pathway see:

<http://pathways.nice.org.uk/pathways/behaviour-change>

NICE Pathway last updated: 18 November 2020

This document contains a single flowchart and uses numbering to link the boxes to the associated recommendations.



## 1 Behaviour change

No additional information

## 2 Principles for assessing social context

Policy makers and commissioners planning behaviour change interventions or programmes for communities or populations, especially disadvantaged or excluded groups, should:

- Identify and attempt to remove social, financial and environmental barriers that prevent people from making positive changes in their lives, for example, by tackling local poverty, employment or education issues.
- Consider in detail the social and environmental context and how it could impact on the effectiveness of the intervention or programme.
- Support structural improvements to help people who find it difficult to change, or who are not motivated. These improvements could include changes to the physical environment or to service delivery, access and provision.

## 3 Principles for selecting interventions and programmes aimed at individuals

Commissioners, service providers and practitioners working with individuals should select interventions that motivate and support people to:

- understand the short, medium and longer-term consequences of their health-related behaviours, for themselves and others
- feel positive about the benefits of health-enhancing behaviours and changing their behaviour
- plan their changes in terms of easy steps over time
- recognise how their social contexts and relationships may affect their behaviour, and identify and plan for situations that might undermine the changes they are trying to make
- plan explicit 'if-then' coping strategies to prevent relapse
- make a personal commitment to adopt health-enhancing behaviours by setting (and recording) goals to undertake clearly defined behaviours, in particular contexts, over a specified time
- share their behaviour change goals with others.

Also see [developing interventions and programmes](#) for practical guidance on designing

interventions.

## 4 Interventions and programmes aimed at communities

Policy makers and commissioners planning behaviour change interventions and programmes for communities or subgroups in the population should invest in interventions and programmes that identify and build on the strengths of individuals and communities and the relationships within communities. These include interventions and programmes to:

- promote and develop positive parental skills and enhance relationships between children and their carers
- improve self-efficacy
- develop and maintain supportive social networks and nurturing relationships (for example, extended kinship networks and other ties)
- support organisations and institutions that offer opportunities for local people to take part in the planning and delivery of services
- support organisations and institutions that promote participation in leisure and voluntary activities
- promote resilience and build skills, by promoting positive social networks and helping to develop relationships
- promote access to the financial and material resources needed to facilitate behaviour change.

## 5 Interventions and programmes aimed at populations

### Target audience

National policy makers, commissioners and others whose work impacts on population-level health-related behaviour.

### Recommended action

Deliver population-level [See page 6] policies, interventions and programmes tailored to change specific, health-related behaviours. These should be based on information gathered about the context, needs and behaviours of the target population(s). They could include:

- fiscal and legislative interventions
- national and local advertising and mass media campaigns (for example, information campaigns, promotion of positive role models and general promotion of health-enhancing

- behaviours)
- point of sale promotions and interventions (for example, working in partnership with private sector organisations to offer information, price reductions or other promotions).

Ensure population-level interventions and programmes aiming to change behaviour are:

- consistent with those delivered to individuals and communities
- based on the best available evidence of effectiveness and cost effectiveness
- have assessed the risks, costs and benefits for all target groups.

## 6 Policy, strategy and commissioning

[See Behaviour change / Policy, strategy and commissioning to help individuals change behaviour](#)

## 7 Providing interventions and programmes

[See Behaviour change / Providing interventions and programmes to help individuals change their behaviour](#)

## 8 Evaluation

[See Behaviour change / Behaviour change: evaluation](#)

## 9 Training in behaviour change interventions

[See Behaviour change / Training in behaviour change interventions](#)

## 10 See what NICE says on ensuring adults have the best experience of NHS services

[See Patient experience in adult NHS services](#)

population-level interventions are national policies or campaigns that address the underlying social, economic and environmental conditions of a population to improve everyone's health. This type of intervention could include, for example, distributing leaflets to the whole population highlighting the importance of being physically active, adopting a healthy diet and being a healthy weight

## Glossary

### **communities**

(social or family groups linked by networks, geographical location or another common factor)

### **population**

(the aggregate of individuals defined by membership of a social, geographic, political or economic unit [for example, members of a state, a region, a city or a cultural group])

### **populations**

[the aggregate of individuals defined by membership of a social, geographic, political or economic unit [for example, members of a state, a region, a city or a cultural group]]

### **resilience**

(the ability to withstand or even respond positively to stressors, crises or difficulties)

## Sources

[Behaviour change: general approaches](#) (2007) NICE guideline PH6

## Your responsibility

### **Guidelines**

The recommendations in this guideline represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, professionals and practitioners are expected to take this guideline fully into account, alongside the individual

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needs, preferences and values of their patients or the people using their service. It is not mandatory to apply the recommendations, and the guideline does not override the responsibility to make decisions appropriate to the circumstances of the individual, in consultation with them and their families and carers or guardian.

Local commissioners and providers of healthcare have a responsibility to enable the guideline to be applied when individual professionals and people using services wish to use it. They should do so in the context of local and national priorities for funding and developing services, and in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities. Nothing in this guideline should be interpreted in a way that would be inconsistent with complying with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

## Technology appraisals

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, health professionals are expected to take these recommendations fully into account, alongside the individual needs, preferences and values of their patients. The application of the recommendations in this interactive flowchart is at the discretion of health professionals and their individual patients and do not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian.

Commissioners and/or providers have a responsibility to provide the funding required to enable the recommendations to be applied when individual health professionals and their patients wish to use it, in accordance with the NHS Constitution. They should do so in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

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## Medical technologies guidance, diagnostics guidance and interventional procedures guidance

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, healthcare professionals are expected to take these recommendations fully into account. However, the interactive flowchart does not override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

Commissioners and/or providers have a responsibility to implement the recommendations, in their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations. Nothing in this interactive flowchart should be interpreted in a way that would be inconsistent with compliance with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.