

Cost Effectiveness of a Telephone-Delivered Intervention for Physical Activity and Diet

Interventions to improve physical activity (PA) and diet are effective when delivered in the community, in healthcare and workplace settings, and across a variety of modalities. Previous economic analyses of PA and diet behaviour change programs show evidence for cost-effectiveness, yet there is still scope for work to increase the adoption of such programs. This may be in part, due to the lack of high-quality economic analysis of health behaviour change intervention trials. In turn, the aim of this paper is to describe a cost-effectiveness evaluation of an intervention delivered via telephone to improve PA and diet among adults with chronic conditions, recruited from Australian primary care practices.

Data was collected between February 2005 and November 2007 from a study that compared telephone counselling with a usual care alternative. Modelling was then used to predict the progress of participants for 10 years after the groups were compared and is a particular strength of this study. Studies thus far had only captured the effectiveness of interventions during the duration of the data collection. Moreover, this research is unique in that it looks at individuals from socio-economically disadvantaged communities, with 65% of participants having three or more co-morbidities.

Although one must take caution when generalising results, the study indicates that telephone counselling was not cost effective when compared to usual care, but when compared to existing practices it was found to be cost effective.

Graves, N., Barnett, A., Halton, K., Veerman, J., Winkler, E., Owen, N., Reeves, M., Marshall, A. and Eakin, E., 2009. Cost-Effectiveness of a Telephone-Delivered Intervention for Physical Activity and Diet. PLoS ONE, 4(9), p.e7135.



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