

# [While discussing the intervention with caroline she told](https://assignbuster.com/while-discussing-the-intervention-with-caroline-she-told/)

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While evaluating the report I was responsible for carryingout data audits/ quality assurance checks, inputting data, analysing data, literature reviewing and report writing. To do this I had to use some of theskills I have from my degree. My data management skills were often used to carry outthese tasks as I was responsible for data handling and entering and checkingdata.

My statistical and analytical skills also were important as I had to beable to examine and manipulate data in SPSS and identify and evaluate generalpatterns to see what the data was saying. Computer skills were essential forall of these tasks. Communication skills, both oral and written, also came intoplay as I needed to communicate any difficulties that occurred and discuss anyuncertainties and talk through what I should do. My written communicationskills were also frequently used as I was writing up a report so had to be ableto communicate clearly and concisely, use good grammar, correct spelling andproper punctuation in order for the report to be understandable. Being able tofollow instructions and fix mistakes were also essential in my placement as Ihad to be able to respond to feedback and rework my report based on Caroline’sfeedback.

Action Cancer specialises in breast cancer awareness, prevention, detection, support and research. The WhyWeight? lifestyle change programme aimed to reduce the risk of breast cancer bypromoting sustained healthy lifestyles, reducing weight, and increasingphysical activity. Government statistics show breast cancer is themost common type of cancer in women in Northern Ireland.

Approximately 1, 200women are diagnosed with breast cancer in NI each year (nidirect, 2015). Anumber of studies have shown a link between diet and physical activity andincreased risk of breast cancer. Most recently, Mehra, Berkowits, Sanft (2017)found that following a healthy diet and recommended physical activity guidelineswas associated with a decreased risk of breast cancer.

The Why Weight? lifestyle change intervention is based around these findings. WhenI was discussing the intervention with Caroline she told me she was reallyinspired by the Star Model When creating the programme. The Star Model is amotivational theory and is typically used for job interviews but the idea ofapplying it to health related behaviours was a really interesting newinterpretation and I thought this was important to look into. S. T.

A. R. is anacronym for situation, task, action, results. Situation is about setting thescene, giving context and background to the situation, task is the exact dutyrequired by the situation, action (argued to be the most important part of themodel) is how you actually responded, and result is what happened as aconsequence (Galbraith, 2017). Theintervention framework was based around the Star Model.

For the situationaspect where participants were getting background or context to the situationthey were told about the prevalence of cancer, the costs of cancer, their risklevel and the impact changing their current diet, weight and physical activitywould have on reducing their risk. The task aspect outlined the exact changesparticipants would need to make in their situation, in terms diet and physicalactivity. Action was the steps participants actually took for example cuttingout sugary treats, exercising for half an hour each day.

Action varied fromparticipant to participant and these were the measures recorded. Result waswhat happened as a result of participants actions this was weight loss, decreased risk of cancer etc. the thought behind using this model to guide theintervention was get participants not to solely think about the result (losingweight) but the steps required to do this and the reason they were doing this(situation- i. e. breast cancer risk) so the end goal would be more attainableand participants would have a reason to preserve and motivate themselves withwhen the intervention challenged them.

The Health Benefit Modelwas developed in the 50s by Hochbaum, Rosenstock, and Kegels, socialpsychologists, working in the United States Public Health Services and tounderstand why a free tuberculosis screening programme had failed. In short, the HBM says a person will take a health-related action if they feel they canavoid an adverse health condition by doing so, thinks the recommended actionwill be successful in avoiding a negative health condition and is confidentthey can take the recommended action. The star model approach to theintervention tried and achieve these feelings in participants by making theprogramme seem realistic and do-able.