Showcasing LifeGuide: software that allows YOU to create internet-delivered interventions

LifeGuide: the first five years

Lucy Yardley
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- unique set of software tools enabling researchers with no programming skills to create interactive online behaviour change interventions
- easy to quickly modify interventions (e.g. during development, after feedback, when circumstances change)
- reduces time and costs caused by duplication of programming for each intervention
- open source, free opens up use by new researchers, developing countries, facilitates collaboration

www.LifeGuideonline.org

Southampton Southampton

Highlights from just 5 years of LifeGuide

Attracted over £15 million funding to University of Southampton (ESRC, EPSRC, MRC, NIHR, EC, DoH, MoD)

Now over 1500 people worldwide registered on the LifeGuide Community website

First full trial of a completed LifeGuide intervention (carried out in 6 European countries) published in Lancet

Many interventions developed and being trialled at Southampton and internationally – those presented today just a taster

SPaCE: an intervention for parents and carers of children with eczema

Miriam Santer





Miriam Santer¹, Ingrid Muller², Lucy Yardley², Sue Lewis-Jones³, Steve Ersser⁴, Paul Little¹.

¹Primary Care and Population Sciences, University of Southampton

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³University of Dundee

⁴University of Hull

Funding: £129,000

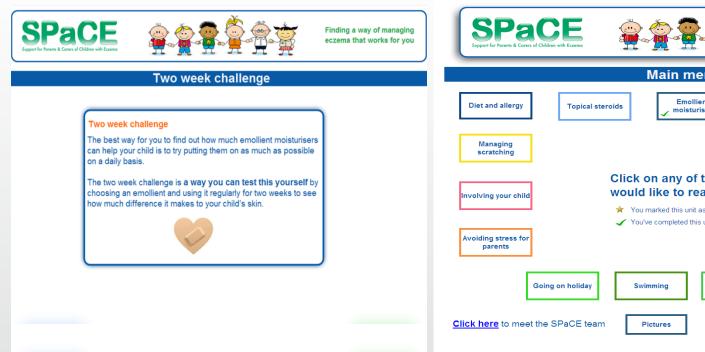
Funder: NIHR Research for Patient Benefit

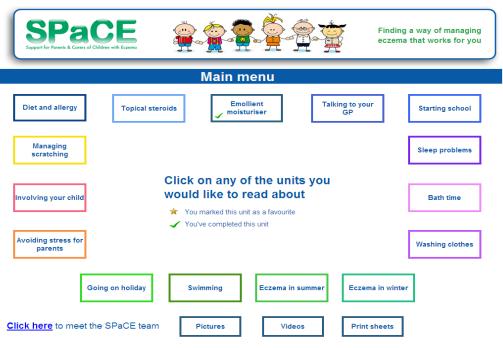
Aim: To develop and test a web-based behavioural intervention for parents and carers of children with eczema.





- Qualitative study with 28 parents to inform intervention
- Pilot RCT with 143 carers recruited through 31 practices
- 3. Qualitative interviews with 13 HCPs (mainly practice nurses) and 26 participants









- The mean decrease in follow-up compared with baseline POEM score was 1.56 in website groups and 0.41 in the usual care group, i.e. a difference between groups of 1.15 (95% confidence interval -0.81 to 2.3)
- Health care professional support did not improve outcomes and was not valued by participants as website was a better 'fit' with their lives

Next steps:

Seek funding for full-scale trial to measure effect on eczema severity

ACTIB – Assessing Cognitive behavioural Therapy in Irritable Bowel

Hazel Everitt & Stephanie Hughes

Hazel Everitt¹, Rona Moss-Morris², Southamptor Trudie Chalder², Paul McCrone³, Sabine Landau³, Flis Bishop⁴, Robert Logan⁵, Nicholas Coleman⁶, Paul Little¹

¹ School of Medicine, University of Southampton

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⁶ Southampton University Hospital Trust

Funding: £1,232,554

Funder: NIHR

LifeGuide is being used to develop web-based materials to support people with Irritable Bowel Syndrome.

Regul-8 self-management website previously developed for MIBS. This is being amended and updated for the ACTIB trial.

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⁴School of Psychology , University of Southampton

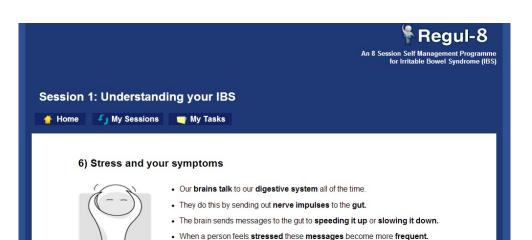
Aim:

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To determine the clinical and costeffectiveness of therapist delivered cognitive behavioural therapy and web-based CBT selfmanagement in irritable bowel syndrome.

3 arms in the trial:

- 1. 8 one hour telephone CBT sessions + Paper manual
- 2. 8 on-line modules + 5 thirty minute telephone CBT sessions
- 3. Treatment as Usual
- · Recruitment target: 495 from Southampton and London
- · Clinical effectiveness will be assessed by examining the difference between arms in the IBS Symptom Severity Score and Work and Social Adjustment Scale
- · ACTIB will go live in Spring 2014



down (constipation).

Back

....but why does the body do this?

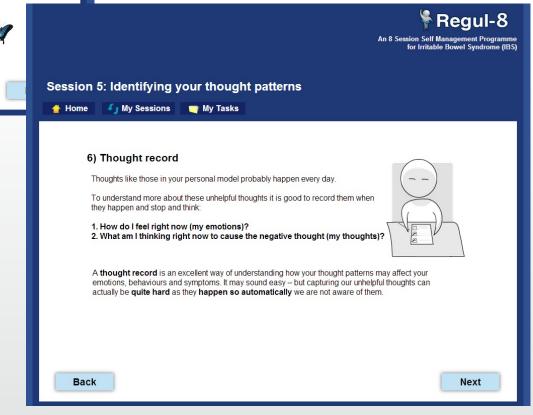
. This can result in your body speeding up the bowel (diarrhoea) or slow it

have you ever heard of the phrase?

"I have butterflies in my tummy!"

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A snapshot of the ACTIB website – Regul-8



INDRA: An intervention for managing stress in primary care

Adam Geraghty

Southampton Southampton

Adam Geraghty¹, Michael Moore¹, Paul Little¹, Lucy Yardley², Ricardo Munoz³

¹Primary Care and Population Sciences

²School of Psychology

³Palo Alto University/University of California, San Francisco

Funding: £45,094

Funder: NIHR School for Primary Care Research

LifeGuide is being used to develop an intervention for patients who present in primary care experiencing emotional distress.



Aim: To develop an internet intervention to support patients in managing difficult emotions by

- 1. Providing a broad range of psychological and behavioural techniques
- 2. Allowing patients to chose techniques that suit them
- 3. Encouraging use as and when needed, rather than as a linear course





- Qualitative testing is ongoing with primary care patients
- Patient's experience and understanding of distress is being explored through in-depth interviews. Emerging themes are being used to modify and contextualise LifeGuide material
- Use of LifeGuide allows US team to develop a version of INDRA intervention for Spanish speakers

Next steps:

- Complete qualitative testing
- Intervention to be tested in large trial in comparison to smart phone App. Plans for large US trial. Grant submissions for UK trials for distress and disease-related distress

POWeR Plus: Trialling an intervention for sustained weight loss

Emily Smith





Emily Smith, Jo Kelly, Lucy Yardley, Paul Little with

Julie Hooper, Stephanie Hughes, Michael Moore, Mark Weal, Peter Smith, Beth Stuart, James Raftery, Christopher Byrne, Barrie Margetts, Hilary Warwick, Ravita Taheem, Richard Hobbs, Mike Lean, David Turner, Simon Griffin, Catherine Brant

Faculties of Medicine, Social and Human Sciences and ECS at University of Southampton, plus University of Oxford

Funding: £1,090,461

Funder: National Institute of Health Research: Health Technologies

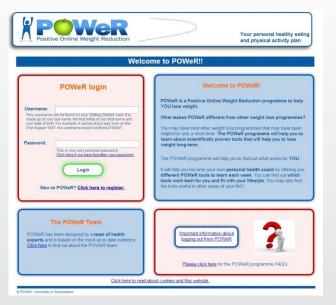
Agency

LifeGuide was used to develop web-based materials suitable for helping people to self-manage their weight with support from practice nurses.





- **Aim:** To estimate the effectiveness and cost-effectiveness of an internet based behavioural intervention with face-to-face nurse support vs remote nurse support:
- 1.Uses goal setting to establish long lasting healthy eating and exercise behaviours
- 2. Nurses encouraged to use motivational interviewing techniques to support but not advise participants
- 3.Individual tailoring to support self-management of weight









- Pilot study recruited 179 participants across 5 practices.
 - Pilot study reported greatest weight loss with regular (7 face-to-face sessions) nurse support at 6 months, but greater weight loss maintenance at 12 months with basic (3 face-to-face sessions) nurse support.
- Main trial recruiting 790 participants across 55 practices
- LifeGuide allows delivery of a tailored weight management programme encouraging sustained weight loss

Next steps:

- Complete recruitment for main trial
- Begin 12 month follow-up of first participants
- Due to complete early 2015

LifeCIT

A web-based support programme for people using Constraint Induced Movement Therapy (CIMT) at home

Jane Burridge, Lucy Yardley, Ann-Marie Hughes, Sebastien Pollet and Claire Meagher



This presentation presents independent research funded by the National Institute for Health Research (NIHR) under its Research for Patient Benefit (RfPB) Programme (Grant Reference Number PB-PG-0909-20145). The views expressed are those of the authors and not necessarily those of the NHS, the NIHR or the Department of Health.

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Constraint Induced Movement Therapy - CIMT

- Learnt non-use changes in motor cortex topology weakening of synaptic connections etc.
- Intensive short-term training
- Evidence: from animal models to large clinical trials and systematic reviews (Taub, 1994) (Sirtori et al., 2009)
- CIMT programme:
 - Constraint of the unaffected limb (90% of waking hours)
 - Repetitive training
 - 1:1 therapy (6 hours/day for 2 weeks) + activities at home
- Cost of therapy time
- Patient and carer burden adherence & motivation

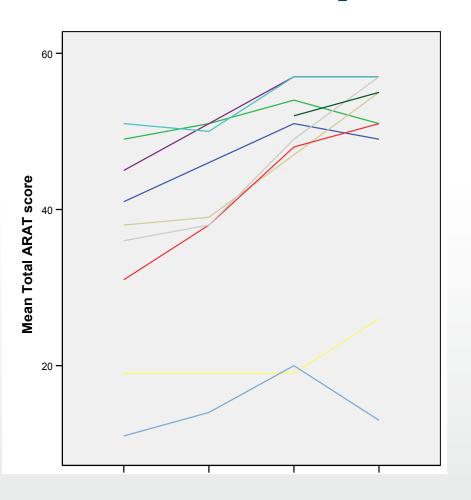


The C-Mit www.odstockmedical.c om





Forced Use trial with patients <6 months post-stroke



- Study design: ABA N=10
- All completed the trial
- No adverse events



- Mean change in ARAT score from 38.3
 (SD 13.7) (A1) to 53.1 (SD 15.13) (A4)
- Statistically significant changes (A3-A2)
 corrected for natural recovery (p=0.016)
 - Lower functioning patients benefitted less



The LifeCIT concept

- Forced use therapy 3 weeks
- Interactive website
- Motivating support and feedback
- Exercises and games
- Minimal cost: £50 for the constraint mitt



Phases of the study

- Phase 1: development (18 months) (2011-2012)
- Phase 2: multi-centre pilot RCT (24 months) (2012-2013)



Phase 1: Prototype 2. Developed via think-aloud studies with 12 sub-acute (<12 weeks) patients in hospital and home

Developments based on observed patients' behavior navigating the website and simultaneous oral feedback



Developments based on observed patients' behavior navigating the website and simultaneous oral feedback

- Website navigation:
 - avoid multiple menu options linear progression through the pages
 - no scrolling all information on one page
- Clarity of instructions:
 - minimal text and avoiding ambiguity
 - motivational language and illustrations e.g. 'congratulations' 'use or lose it'
 - Instructions via video with a voice-over rather than text



Final Version of the Website



LifeCIT Welcome to LifeCIT If this is the very first time on the LifeCIT website then click here: This is the first time I am using LifeCIT If you already registered with LifeCIT then click here: I've used LifeCIT before If an existing LifeCIT user has given you their user View user name to view their progress, click this button: progress



LifeCIT



How can I get the most out of LifeCIT?

Wear the mitt for up to 9 hours a day. The longer you wear it, the better the chances of improving.

Log onto LifeCIT each morning and plan daily activities that you can do using your stroke arm

Log on later in the day to tell LifeCIT what you have been doing

Play LifeCIT computer games and do some LifeCIT arm exercises

Click here to continue:

Next

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LifeCIT

How long do I need to use LifeCIT for?

to help you to wear your mitt for 15 days, 5 days a week (3 weeks in total)

Doing LifeCIT for 5 days in a row and then having 2 days off may give you the most benefit - you can choose which days are rest days.



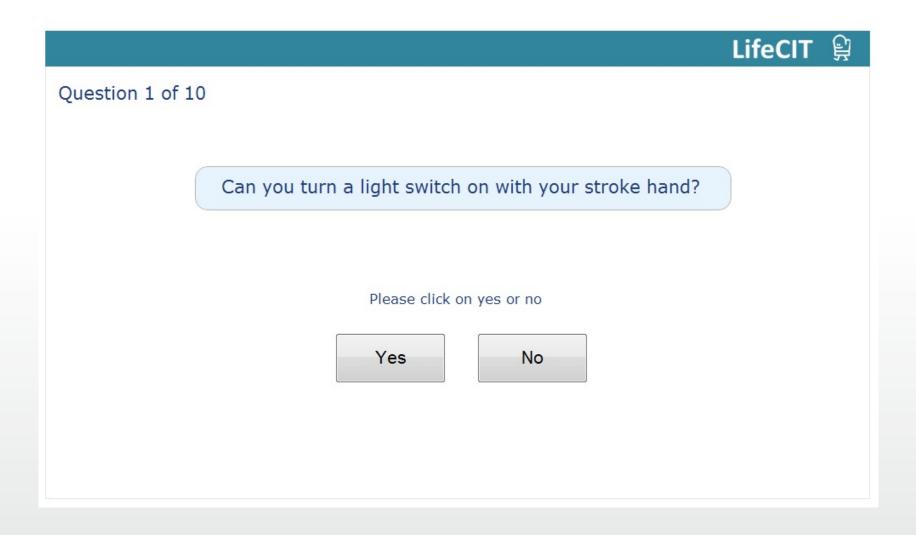
Click here to continue:

Next



LifeCIT Watch a film on how to use LifeCIT Click here to Click on the continue: button with a triangle to Next play the film



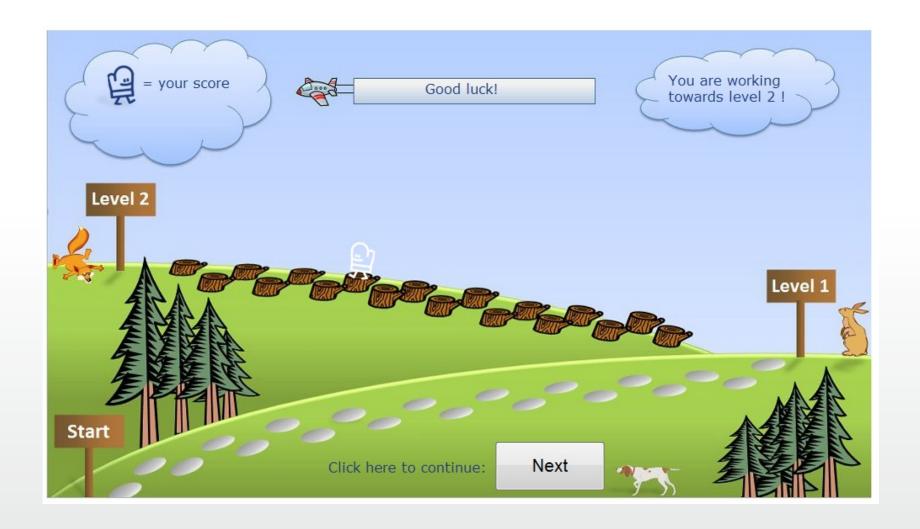




	LifeCIT 😭
Question 1 of 10	
That's great!	
How well can you turn a light switch on with your stroke hand?	
Click on the O symbol next to the best answer	
O Very slowly, with difficulty	
Slowly, with some effortAlmost normally	
As well as before my stroke	
Back	



LifeCIT Question 10 of 10 That's great! How well can you open a door by turning the door knob or handle with your stroke hand? Click on the symbol next to the best answer Very slowly, with difficulty Slowly, with some effort Almost normally As well as before my stroke Next Back





LifeCIT Set your goals for this week Select goals by clicking on the small grey circles: The numbers in orange are our suggestions for a goal, I will wear the mitt for: but you can choose what is realistic for you this week 10 hours a day 0 0 0 0 0 I will do activities for: 10 hours a day 0 0 0 0 I will play LifeCIT computer games for: 15 30 45 0 60 minutes, twice a day Next 0 0 0 0



LifeCIT

T 🖺

For yourself

Select **as many** activities as you like, from **any level**, by clicking on the small grey square. You can de-select an activity by clicking on the grey square again.

Level 1

- Wash face
- Brush hair
- Apply cream/moisturiser
- ☑ Eat a meal/snack with fingers

Level 2

- Brush teeth
- Style hair
- Pour a cold drink
- ☑ Drink from glass/cup
- Eat a meal/snack with cutlery
- Make a phone call
- Electric shave

Level 3

- Wet shave
- Put makeup on
- Prepare a simple meal/snack
- Open a letter
- Write a few sentences



LifeCIT



Your list of activities for today (19 Sep 2012):

- Hand painting with grandson
- Eat a meal/snack with fingers
- Drink from glass/cup
- Open a letter
- Wipe down kitchen surfaces
- Set the table
- Clean windows (inside)
- Carry a shopping bag from a shop
- Unload dishwasher
- Play scrabble
- Play Connect 4
- Do a jigsaw puzzle (small pieces)

Goals for today:

- Wear the mitt for 9 hours
 - Do 4 hours of activities

Have you selected enough activities to be busy for 4 hours today?

Click here to add more activities:

Go back

Print list

(if you have a printer)

Email list

(if you have an email address)

Text list

(if you have a mobile phone)

Open new window

(to open a copy of the list to keep for reference)

Click here to continue:

LifeCIT

Wrist bending and straightening

- Place your forearm over the edge of a chair arm or table with the palm of your hand facing down
- Hold your arm with your other hand to keep it in place
- Lift your wrist as high as you can for a count of 3
- Lower your wrist down for a count of 3
- Repeat 5 times



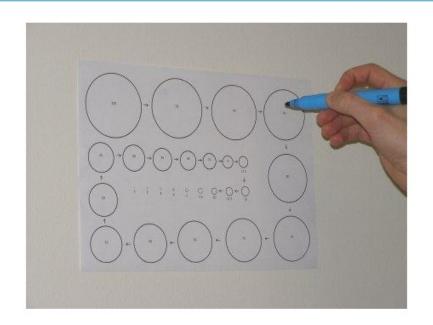
LifeCIT

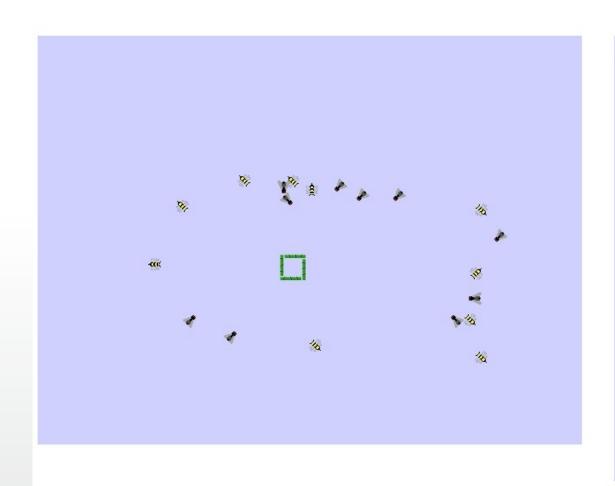
Targets

- You can only do this exercise if you have a printer
- Print the targets sheet by clicking here:

Targets sheet printing page

- · Attach the sheet to a wall
- Using a felt-tip pen or marker, try to hit the inside of each circle, starting with the largest one





Game instructions:

When you start the game, your computer mouse will be in control of a green square on the screen:



Move the green square with your computer mouse to swat the black "flies" inside the purple box. The more flies you swat, the better your score will be! But be careful not to hit any yellow-and-black "bees" - hit 10, and it's Game Over! Your scores are recorded below

Pause

Current score: 1

Bees struck: 4

Best score so far: 0

© 2007 Ben Bryant, First Objective Software, Inc.



LifeCIT A graph of your progress for mitt wear time The goal that you have set for this week is to wear the Mitt wear mitt for 9 hours a day. 10 Start Day Next



LifeCIT A graph of your progress for activity time The goal that you have set Activity time for this week is to do 4 hours of activities every day. Start Day Next

Developing materials for people with low health literacy: an international study

Ingrid Muller



Ingrid Muller¹, Ali Rowsell¹, Chris Byrne², Paul Little², Don Nutbeam³, Lucy Yardley¹

¹School of Psychology

² School of Medicine

³ Office of the Vice-Chancellor

Funding: €455,000

Funder: European Union under the Seventh Framework

Programme (FP7)

LifeGuide was used to develop web-based materials suitable for people with lower levels of health literacy using tailoring, interactivity and engaging audio-visual and quiz formats.

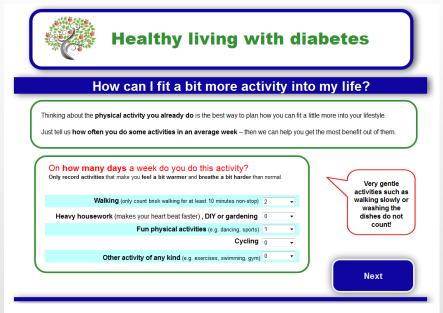




Aim: To examine the potential for web-based materials and tools to provide enhanced support by:

- 1. Tailoring the material to the user
- 2. Employing engaging audio-visual presentation and quiz formats
- 3. Providing simple interactive tools to support self-management









- Qualitative testing of 35 participants in the UK
- > Positive feedback, similar across health literacy levels
- LifeGuide allows rapid duplication and adaptation of interventions: Intervention has been adapted for use in USA and Ireland, and translated for use in Austria and Germany

Next steps:

- Complete qualitative testing in Ireland, USA, Germany and Austria
- Intervention to be tested in a RCT across all 5 countries comparing it to a static version of the website (N = 700)

Evaluating a self-management intervention for older adults with dizziness

Rosie Essery



Collaborators and Funding



Rosie Essery¹, Adam Geraghty², Sarah Kirby¹, Paul Little², Adolfo Bronstein³, Gerhard Andersson⁴, Per Carlbring⁵, Beth Stuart², David Turner⁶, Lucy Yardley¹

- ¹School of Psychology
- ² Department of Primary Care and Population Sciences
- ³ Dept. Of Medicine, Imperial College London
- ⁴ Dept. of Behavioural Sciences and Learning, Linköping University
- ⁵ Umeå University
- ⁶ Faculty of Medicine and Health Sciences, University of East Anglia

Funding: £155,380

Funder: The Dunhill Medical Trust

Utilising LifeGuide to develop 'Balance Retraining': a standalone intervention for the treatment of vestibular-related dizziness suitable for use by adults aged 50+.

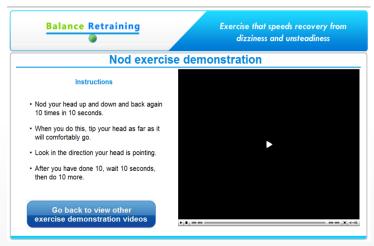


Using LifeGuide In This Project



• **Research Question:** 'Can an online intervention for dizziness be more effective than usual care in reducing self-reported symptoms amongst adults aged 50 years+?'





• Central component of intervention - Vestibular Rehabilitation Therapy

exercises:

- Instructions

Demonstrations

Information

- Tailored support and feedback

Balance Retraining	Exercise that speeds recovery from dizziness and unsteadiness
Your Balance Retraining	g exercises for this week
To recap, here are the exercises Balance Retraining rec Exercise Scoring Test feedback. You may find it helpful	
This week you should practice the shake exercise while	st standing up.
This week you should practice the nod exercise whilst	standing up.
This week you should practice the shake, eyes closed	exercise whilst standing up.
This week you should practice the nod, eyes closed e forwards.	xercise whilst walking a few steps backwards and
This week you should practice the shake , stare exercise	se whilst standing up.
This week you should practice the nod, stare exercise	whilst standing up.
 ■ Back	Next



Preliminary Feedback and Current Work



- **Development** longitudinal design: semi-structured and thinkaloud interviews with 18 users of development version:
 - liked general 'look and feel', especially positive about demo videos and tailored feedback

"I am managing the way I deal with my Meniere's better since I've been doing the balance retraining." (P203, Int. 3, M) "I found that helpful, to actually see somebody else doing it, so that you know you're doing it exactly correctly" (P204, Int.3, F)

- many also reported benefits from practicing exercises after just 6 weeks

- Current phase RCT investigating effectiveness and costeffectiveness of intervention in primary care:
- 71 GP practices to recruit 262 participants, randomisation, baseline measures and follow up at 3 and 6 months. Primary outcome: VSS.
- Intervention group: access intervention once per week, practice exercises 2 x per day for min. 9-12 weeks.





RESTORE: An exploratory randomised controlled trial of an online intervention to enhance confidence to manage problems associated with cancer related fatigue following primary cancer treatment.

Claire Foster



Claire Foster¹, Chloe Grimmett¹, Chris May¹, Lynn Calman¹, Jo Armes⁵, Matthew Breckons⁶, Jessica Corner², Deborah Fenlon², Claire Hulme⁷, Carl May², Emma Ream⁵, Alison Richardson², Peter Smith⁴, Lucy Yardley³

- ¹ Macmillan Survivorship Research Group, Faculty of Health Sciences
- ² Faculty of Health Sciences
- ³ School of Psychology
- ⁴ Social Sciences: Social Statistics & Demography
- ⁵ Florence Nightingale School of Nursing & Midwifery
- ⁶ Institute of Health & Society, Newcastle University
- ⁷Leeds Institute of Health Sciences, University of Leeds

Funding: £ 350,000 (approx)

Funder: Macmillan Cancer Support

LifeGuide was used to develop an online intervention to enhance confidence to manage problems associated with cancer related fatigue following cancer treatment.





Exploratory Randomised Controlled Trial

- The aim of this study is to test whether the use of an online intervention increases self-efficacy to self manage fatigue following completion of primary cancer treatment.
- Participants (n=166) randomised (1:1) to RESTORE intervention vs. Macmillan Coping with Fatigue leaflet. The intervention lasted 6 weeks plus 3 month follow-up
- Process evaluation of the RESTORE intervention is also underway using semi-structured interviews of recruitment site staff, RESTORE intervention participants and participants in the Coping with Fatigue leaflet group



The RESTORE resource is divided into 5 sessions:

- **≻**Session 1. Introduction
- **➢** Session 2. Goal setting and planning
- ➤ Session 3 5. Choice of areas to focus on
 - Diet, sleep, exercise, home life, work
 - Managing thoughts and feelings about fatigue
 - Talking to others about fatigue

Activities:

Goal setting, selfmonitoring, feedback/ evaluation, links to other resources; relaxation & mindfulness training



Macmillan Cancer Support - University of Southamptor

REST How a						ed faligue	e after treatr	nent			
Last sessior manage you changed on	we as r fatigu the nex	sked you le. Pleas kt page.	to think e answe	about her the qu	now fatig uestions	below.	You will be	able to	see if th	nings ha	ve
1. H No fatigue			•				of 0 to 1				Worst imaginable fatigue
	to do 1	the thing	gs you	want to	?		e your ca				Totally confident
Back)										Next

© Macmillan Cancer Support - University of Southampton

RESTORE Living with cancer related	i faligue after treatment
Session 2 - setting goals	
This session introduces setting goals and planning. You will be able to develop a goal which will help you become more confident to live with your fatigue. You can also read about other people's experiences of managing cancer related fatigue. This will give you ideas about what might help you.	It may be helpful to refer to your fatigue diary when deciding what your goal is.
Back	Next Next

RESTO	RE Living with cancer related fatigue after treatment
Setting your	goals
	e learnt this week from the session and your fatigue diary, write up to s for this week and a plan of how you will achieve them:
GOAL SETTING S SPECIFIC HASSIRABLE A ATAINABLE RELEVANT TIME-BOUND	1) Goal:
	Plan:
	2) Goal:
	Plan:
	3) Goal:
	Plan:
Back	Next
	© Macmillan Cancer Support - Holyersity of

Internet Intervention Supporting Management of Low Back Pain in Primary Care: a feasibility study

Rosie Stanford





Rosie Stanford¹, Lucy Yardley², Paul Little¹, Lisa Roberts³, Nadine Foster⁴, Jonathan Hill⁴, Elaine Hay⁴, Adam Geraghty¹

Primary Care and Population Sciences¹ School of Psychology², School of Health Sciences³, Keele University ⁴

Funding: £249,934

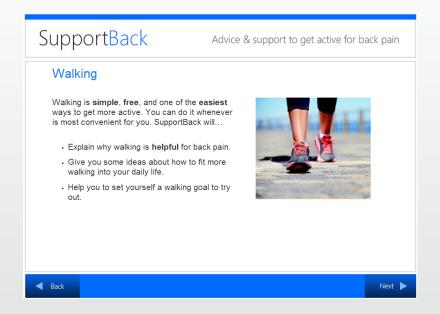
Funder: NIHR Research for Patient Benefit Scheme

LifeGuide is being used to develop a web-based intervention supporting people with low back pain within primary care, using tailored activity and self-management modules.



Aim: To examine the potential of an internet intervention to support self-management of low back pain in primary care by:

- 1. Tailoring information to the user based on functional difficulty.
- 2. Providing positive advice and support to obtain activity goals.
- 3.Offering novel material back pain-related material at each login.



SupportBack



- **Phase 1:** Development of the intervention
- > Working with clinicians to develop and finalise content.
- ➤ Iterative evaluation of the intervention by patient panel (n = 25) via semi structured interviews and think aloud methods.
- **Phase 2:** Feasibility trial (n = 60 90)
- > 3 x trial arms (supported intervention/unsupported intervention/usual care) with 3 month follow up.
- **Next Steps:** To investigate effectiveness in a large-scale trial if feasibility of the intervention is demonstrated.

UBhave: software for creating interventions for smart phones

Charlie Hargood



Charlie Hargood¹, Veljko Pejovic², Neal Lathia³, Danius Michealides¹, Leanne Morrison⁴, Mark Weal¹, Mirco Musolesi², Cecila Mascolo³, Lucy Yardley⁴

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- ² Computer Science Birmingham
- ³ Computer Science Cambridge
- ⁴ Psychology Southampton

Funding: £1.5 million

Funder: Economic and Physical Sciences Research Council (under Cross-Disciplinary Interfaces Programme)

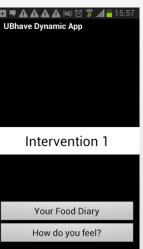
Developing a framework for authoring behaviour change mobile interventions on android.

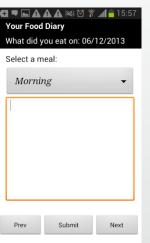


Aim: To create a dynamic generic android client capable of delivering defined interventions created with an authoring tool through templates of common activities.

- 1. What are the key generic activities required for mobile interventions?
- 2. What level of support for author tailoring and custom design is required?

3. How can we make best use of the affordances of pervasive technology (sensors, notifications, etc.)











- Initial prototyping complete with android client
- Provides range of generic activities and notification triggers
 - Surveys, Diaries, Information pages and lists
 - Notifications triggered on time or sensor data
- Stores intervention data and usage logs on central server

Next Steps:

- Authoring Tool: Visual tool for designing and creating interventions
- Intelligent Triggering: Systems that learn when to notify users
- Increased range of activities and visual elements
 - Multimedia slideshows, adaptive visual feedback, tailored structures and content

Understanding development and usage of health behaviour change apps

Leanne Morrison



Leanne Morrison¹, Laura Dennison¹, Charlie Hargood², Sharon Lin³, Danius Michaelides², Mark Weal², Peter Smith³, Lucy Yardley¹

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- ² Electronics and Computer Science
- ³ Statistical Sciences Research Institute

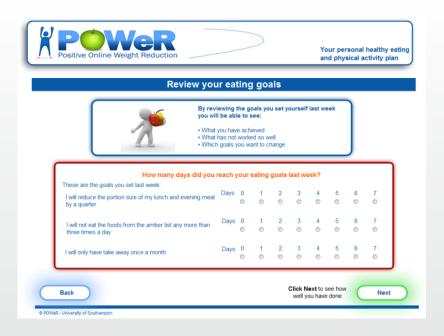
Funding: £1.5 million

Funder: Economic and Physical Sciences Research Council (under Cross-Disciplinary Interfaces Programme)

Existing LifeGuide authored interventions informed the development of health behaviour change 'apps'.



- **Aim:** whether and how an app could add to participants' experiences of using web-based POWeR
- 1. Does access to an app improve thoughts and awareness of weight management goals?
- 2. When, why, and how is an app-based tool used?









- Mixed method 'n of 1' case studies with 13 participants
- > Improved awareness and perceptions of eating goals
- ➤ App more convenient, but website still useful; use of the app triggered by time-relevant app tools, automated notifications, and availability of free moments; individual differences in tool preferences.

Next steps:

- Roll-out POWeR Tracker to up to over 40,000 people in workplaces across North East England
- Development and evaluation of stress management app harnessing sensing capabilities of the phone (in collaboration with the INDRA project)

Visualising LifeGuide usage data

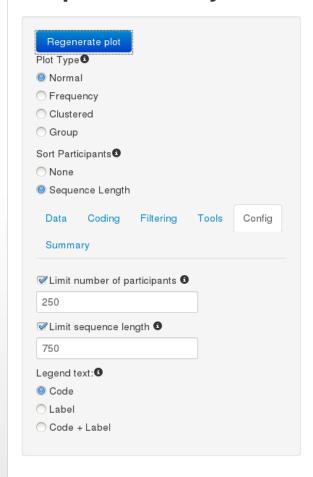
Danius Michaelides Laura Dennison

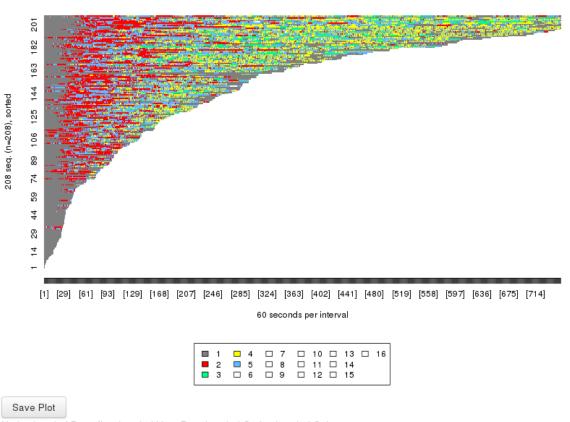


- Take the PageFlow data that LifeGuide records and visualise it as sequences
- · Get an intuition of the usage of an intervention
- Explore the data and begin to look for interesting usage patterns
- · Export participant groupings for further analysis
- Page names -> code -> colour



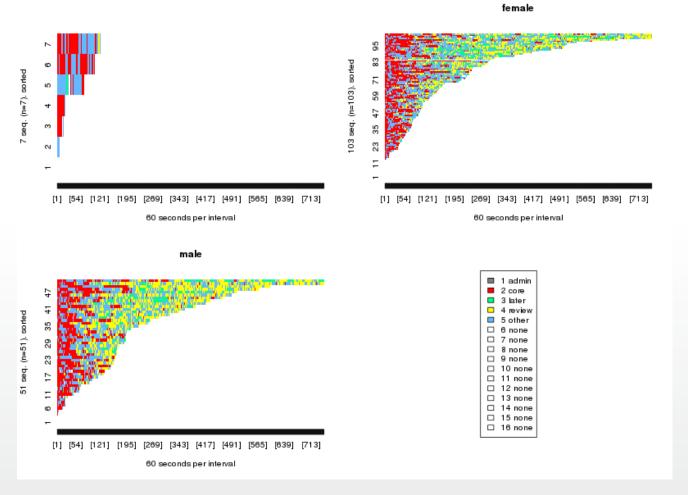
Sequence Analysis





Notice:Loaded Page flow Loaded User Data Loaded Codes Loaded Colours





- Next steps:
- Visualise usage of mixed (web+mobile) interventions
- Release more widely

LifeGuide: the next five years

Lucy Yardley and Mark Weal



Future is bright for next 5 years!

DIPPS: Integrating Digital Interventions into Patient Self-Management Support, NIHR, £2 million, 2014-2019

-working with primary care in hypertension and asthma

CLAHRC: Collaborations for Leadership in Applied Health Research and Care, NIHR, £18 million

-LifeGuide interventions proposed for implementation in 3 of the 6 CLAHRC themes

Numerous proposals submitted/ in preparation (for EC, NIHR, medical charities...)



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LifeGuide support team

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and last but not least Paul Little!

