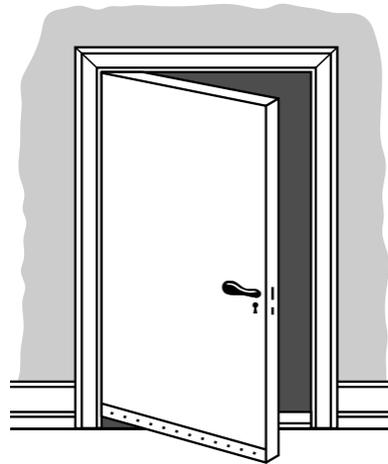


Making Every Contact Count

The open door



Lifestyle Risk Factors

Many long-term diseases affecting the population are closely linked to known behavioural risk factors such as tobacco, hypertension, alcohol, being overweight or being physically inactive change and MECC can help individuals and communities significantly reduce their risk of disease.

North East has some of the worst health figures for adults and children, many of which are significantly higher than the England average, and are preventable.

Core MECC definition

Making Every Contact Count (MECC) is an effective and evidence-based approach to behaviour change that utilises the millions of day-to-day interactions that organisations and individuals have with other people to support them in making positive changes to their physical and mental health and wellbeing.

MECC enables the opportunistic delivery of consistent and concise healthy living information and enables individuals to engage in conversations about their health at scale across organisations and populations.

(national MECC advisory group)

Broader MECC definition

MECC plus

This may include conversations to help people think about wider determinants such as debt management, housing and welfare rights advice and directing them to services that can provide support.

What does it mean?

For organisations MECC means providing their staff with the leadership, environment, training and information they need to deliver the MECC approach.

For staff MECC means having the competence and confidence to deliver healthy lifestyle messages, to encourage people to change their behaviour and to direct them to local services that can support them.

For individuals MECC means seeking support and taking action to improve their own lifestyle by eating well, maintaining a healthy weight, drinking alcohol sensibly, exercising regularly, not smoking and looking after their wellbeing and mental health.

Facts and Figures

80% of heart disease, stroke and type II diabetes cases and 33% of cancers could be prevented by following a healthy lifestyle.

(Implementation Guide and Toolkit for Make Every Contact Count)

More than 60% of the population have a negative or fatalistic attitude towards their own health, particularly in more disadvantaged groups.

What is MECC?

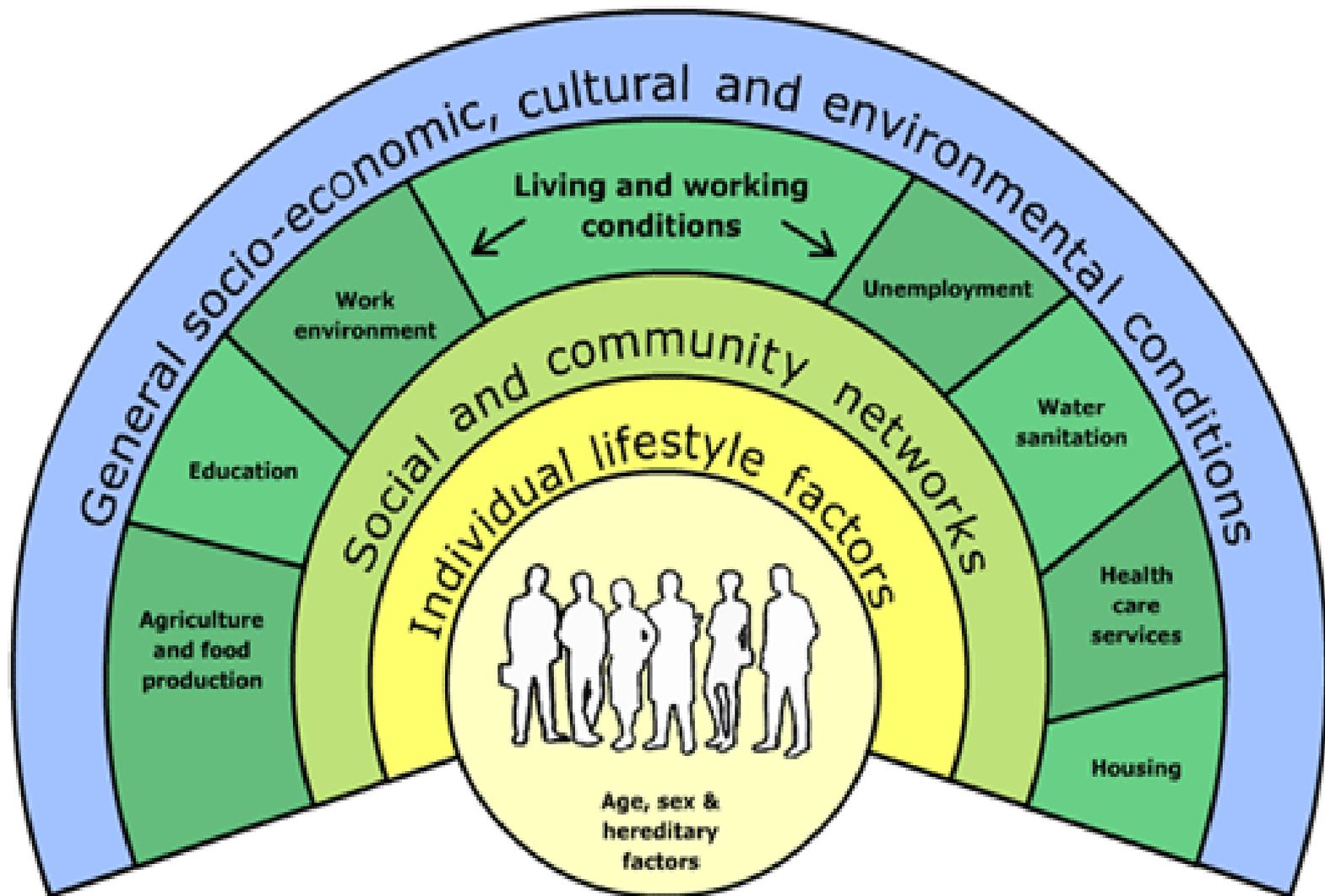
- Systematically *promoting* the benefits of healthy living across the organisation.
- *Asking* individuals about their lifestyle and changes they wish to make, when there is an appropriate time.
- *Advising* appropriately to the lifestyle issue/s once raised.
- Taking the appropriate *action* to either give information, signpost or refer individuals to the support they need.

What MECC is not about...

- It is not about adding another job to your already busy working day.
- It is not about becoming a specialist in a certain lifestyle areas.
- It is not about becoming a counsellor or providing on-going support to particular individuals.
- It is not about telling somebody what to do and how to live their life.

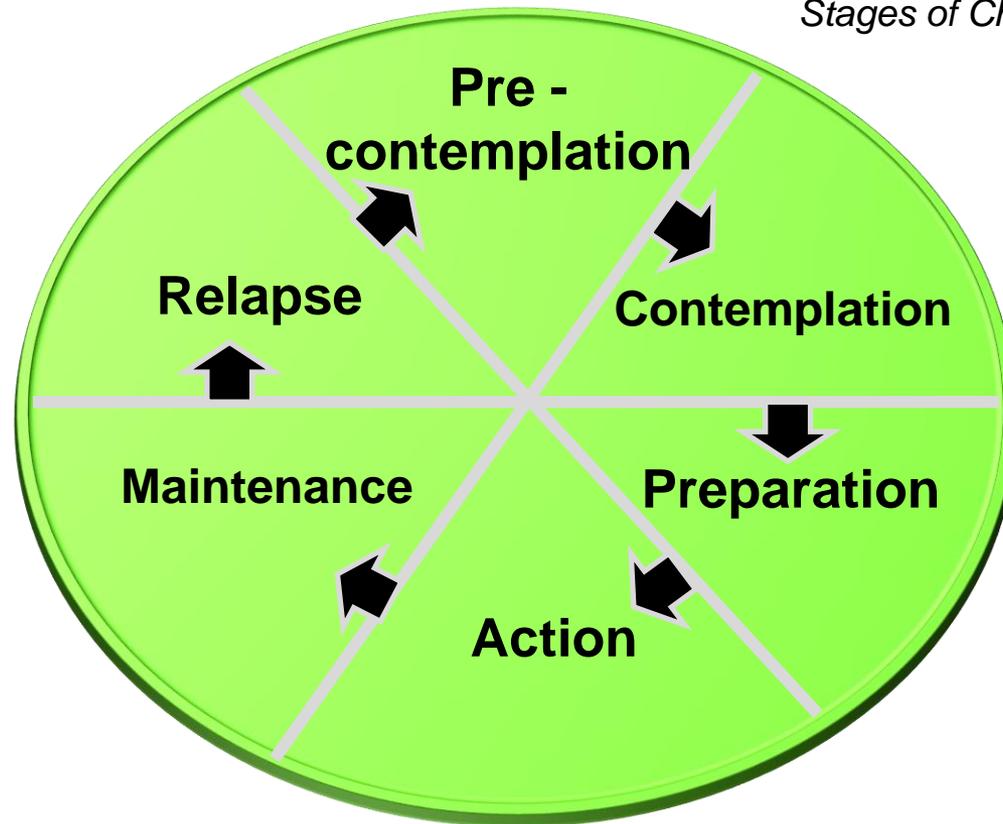
It is about helping other people to know how they can improve their own health and wellbeing.

The Main Determinants of Health



Behaviour Change Cycle

*Prochaska and DiClemente's
Stages of Change Model 1997*



Ambivalence

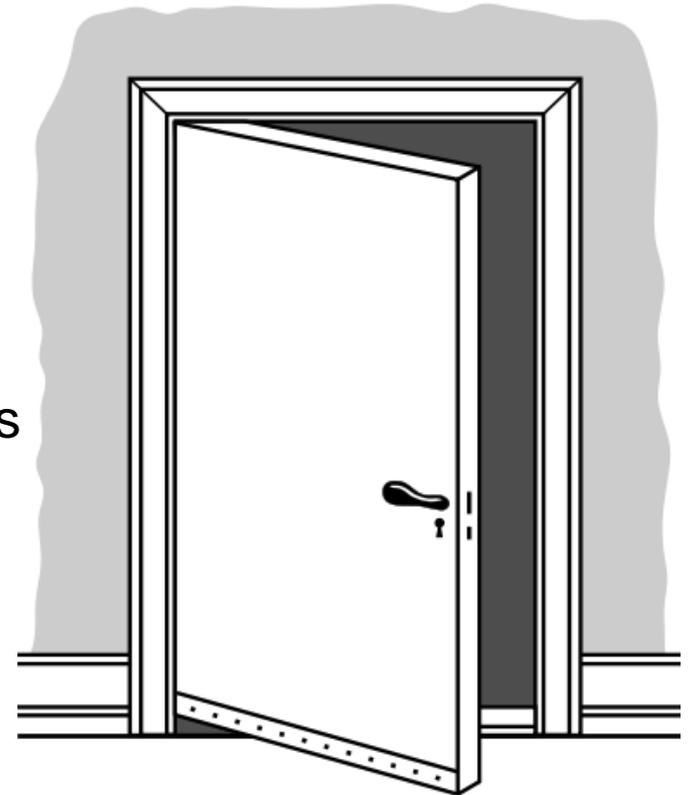
“Helping people resolve ambivalence is the key to change”

- Ambivalence is normal
- Most people will resist an attempt to persuade them of a viewpoint about which they feel ambivalent
- Often our views are formed through belief and not necessarily factual
- Argumentation is a poor method for inducing change

Brief Advice

Definition: Proactively raising awareness of and assessing a persons willingness to engage in further discussion about lifestyle behaviours.

- Lasts approximately 2 minutes
- Usually opportunistic
- Focuses upon solutions not problems



Three 'A' Model of Brief Advice

ASK

Raise the issues using open ended questions

ADVISE

Give a key health message and use it as an opportunity to dispel myths

ACT

Signpost people who are keen to know more

ASK

It is really important to build up a rapport with the person – this forms a fundamental part of the conversation about behaviour change. Try to use open ended questions: What/How questions

General opener:

We are offering people some help with their health and wellbeing. Can you tell me what could be useful for you?

Ronnie Case Study:

'Can you tell me if there are any areas of your life that you would like some support with?'

Brittany Case Study:

'It sounds like you are having a tough time. What do you think might help?'

Advise

You can give Brief Advice when you get the 'open door'. This means the individual has given you verbal or non verbal cues to continue. Listen and observe their body language to check it is ok to proceed.

General

'May I make a suggestion?'

Ronnie Case study

'Making small changes to your current lifestyle could help. Would you like to know about what could be useful?'

Brittany Case Study

'Being on your own all the time could make you reach out for your cigarettes as a way of passing the time. Would it help if I told you what help other people have received in similar situations?'

Act

This is your opportunity to act on the individual's need for information or support. Your role here is to signpost – give the individual relevant contact details that may be of benefit to them.

General:

'Would you like some further information about some services that may help?'

Can I give you a leaflet about.....?

Thank you

Any questions

