Nutrition and Physical Activity: Worksite Digital Health and Telephone Interventions to Increase Healthy Eating and Physical Activity

Summary Evidence Table

This table outlines information from the studies included in the Community Guide systematic review of Workplace Digital Health Interventions to Increase Healthy Eating and Physical Activity. It details study quality, population and intervention characteristics, and study outcomes considered in this review. Complete references for each study can be found in the Included Studies section of the review summary.

Abbreviations Used in This Document:

- Outcomes:
  - BMI: body mass index
  - BF: body fat
  - DBP: diastolic blood pressure
  - FV: fruit and vegetables
  - HDL: high density lipoprotein
  - MPA: moderate physical activity
  - MVPA: moderate to vigorous physical activity
  - PA: physical activity
  - VPA: vigorous physical activity
  - SBP: systolic Blood Pressure
- Study design:
  - iRCT: individual randomized controlled trial
  - gRCT: group randomized trial
- Components:
  - CC: coaching or counseling
  - SM: self-monitoring
  - GS: goal setting
  - FB: computer feedback
  - SS: social support
  - MS: motivational strategies
- Measurement terms:
  - CI: confidence interval
  - d: day
  - dL: deciliter
  - g: grams
  - ITT: intent to treat
  - kg: kilograms
  - L: liter
  - lb: pounds
  - min: minutes
  - mg: milligrams
  - mmHg: millimeters of mercury
  - mmol: millimole
  - m: meters
  - mo: months
  - serv: servings
  - wk: week
  - yrs: years
- Other terms:
  - f/u: follow-up
  - ITT: intention-to-treat
  - NA: not applicable
  - NR: not reported
  - NS: not significant
  - SES: socioeconomic status

Notes:

- **Suitability of design** includes three categories: greatest, moderate, or least suitable design. Read more >>
- **Quality of Execution** – Studies are assessed to have good, fair, or limited quality of execution. Read more >>
- **Race/ethnicity** of the study population: The Community Guide only summarizes race/ethnicity for studies conducted in the United States.
- **Intensity:**
  - High: ≥ weekly contact with trained counselor or coach, either in-person or telephone, and/or daily tracking of dietary/physical activity (PA) habits.
  - Moderate: < weekly contact with trained counselor or coach, and/or weekly tracking of dietary/PA habits
  - Low: No contact with trained counselor or coach; tracking of dietary/PA habits < weekly

- **Intensity:**
  - High: at least weekly contact with trained counselor or coach, either in-person or telephone, and/or daily tracking or reminders of dietary/physical activity (PA) habits.
  - Moderate: less than weekly contact with trained counselor or coach, and/or weekly tracking, goal setting or feedback of dietary/PA habits

  Low: No contact with trained counselor or coach; tracking, less than weekly goal setting or feedback of dietary/PA habits

Study	Study Sample	Intervention Characteristics	Results
Author, Year: Balk-Moller et al., 2017 **Study Design:** gRCT **Suitability of Design**: Greatest **Quality of Execution**: Fair Study Arm(s): Single Intent: Weight Loss	**Sample size:** Intervention: 355 Control: 227 **Demographics:** Intervention (n=152) Mean age: 47.0 yrs Gender: 92.1% female Race/ethnicity: NR SES: low SES Body Fat: 35.3% Control (n=117) Mean age: 47.0 yrs Gender: 92.3% female Race/ethnicity: NR	**Location (urbanicity):** 6 municipalities, Denmark (NR) **Intervention duration:** 9.5mo **When intervention occurred:** August 2012-July 2013 **Intervention:** Intensity: high Component(s): CC+SM+GS+FB+SS+MS Device(s): Computer/website, Mobile/apps *Intervention*: Each group received three clinical examination conducted by trained staff. SoSu-Life Tool is for daily self-reporting diet and PA with personalized	Body weight (kg) Intervention: baseline: 74.5; f/u: NR Comparison: baseline: 73.1; f/u: NR ITT Adjusted Effect: -1.0 kg (-1.94 to -0.08 kg) Total Cholesterol (mmol/L) Intervention: baseline: 5.3; f/u: 5.2 Comparison: baseline: 5.3; f/u: 5.2 ITT Adjusted Effect: -0.3 mmol/L (-0.5 to 1.1 mmol/L) SBP (mmHg) Intervention: baseline: 129.0; f/u: 126.2 Comparison: baseline: 130.8; f/u: 127.9

Study	Study Sample	Intervention Characteristics	Results
Worksite: Nursing home	SES: low SES Body Fat: 35.1%	feedback suggestions for activities and programs, and practical tips and tricks. Social features, including weekly assignments and colleague challenges. Participant chose one pledge out of seven to focus upon: lose weight, eat healthier, improve physical fitness, improve physical strength, quit smoking, decrease the number of cigarettes smoked, or maintain a healthy lifestyle. The program includes a team competition and a point system for the individual user. Program also includes group forums. During the first 16 weeks (Phase 1), each of the individual participants' points were added to the teams' total points. Each month, teams had a chance to win a prize from a simple lottery drawn by the research staff. Points were still collected in the second (22-week) intervention period (Phase 2 wk 16-wk 38), but no prizes were provided. Participants could send a message to counselors regarding use of the program or questions or help regarding how to achieve the goal in their pledge. The participants could also call a hotline during working hours with questions regarding the tool. **Comparison**: untreated: clinical examination conducted by trained staff from the research group for both groups but no intervention.	ITT Adjusted Effect: +1.3 mmHg (-0.4 to 3.0 mmHg) DBP (mmHg) Intervention: baseline: 80.9; f/u: 78.9 Comparison: baseline: 82.1; f/u: 78.1 ITT Adjusted Effect: +0.1 mmHg (-0.9 to 1.1 mmHg) **Paper conclusions**: a web- and app-based tool had a modest yet beneficial effect on body weight and body fat percentage in the health care sector.
Author, Year: Wilson et al., 2016 **Study Design:** gRCT **Suitability of Design**: Greatest **Quality of Execution**: Fair Study Arm(s): Single, treated control group	**Sample size:** Intervention: 182 (baseline data only provided for 106) Control: 234 (baseline data only provided for 147) **Demographics:** Intervention (n=106) Mean age: 47.75 yrs Gender: 67.9% female Race/ethnicity: 40.6% White, 52.8% Black or African American, 1.8% Hispanic or Latino, 5.6% Other	**Location (urbanicity):** 3 large counties Georgia, US (NR) **Intervention duration:** 6mo (data collected 3m, 6m, 12m) **When intervention occurred:** NR **Intervention:** Intensity: moderate Component(s): CC Device(s): telephone *Intervention*:	Diet Quality (Eating Behavior Inventory) Intervention: baseline: 76.7; f/u: 84.0 Comparison: baseline: 76.4; f/u: 81.1 Summary Effect: +2.7, p<0.05 Fat (% calories) (Fat Screener) Intervention: baseline: 38.1; f/u: 35.0 Comparison: baseline: 37.7; f/u: 35.7 Summary Effect: -1.1 pct pts, NS Leisure time physical activity (Godin Leisure-Time Exercise Questionnaire) Intervention: baseline: 23.8; f/u: 37.2 Comparison: baseline: 23.7; f/u: 33.4

Study	Study Sample	Intervention Characteristics	Results
Intent: Diabetes Prevention Type of worksite: city-county government employees (court system, public safety, public works)	SES: 27.4%≤$40K, 10.4% >$100K Control (n=147) Mean age: 46.61 yrs Gender: 59.9% female Race/ethnicity: 41.5% White, 51.0% Black or African American, 1.4% Hispanic or Latino, 2.1% Other SES: 26.6%≤$40K, 12.9% >$100K	8 one-on-one 20 min sessions by telephone with health coach, program manual 16 lessons (healthy eating, PA, weight loss) **Comparison**: received program manual a brief orientation and establishing goals, email reminders to review lessons	Summary Effect: +3.8, NS Physical Activity (work activity) (Baecke Measure of Habitual Physical Activity) Intervention: baseline: 2.4; f/u: 2.4 Comparison: baseline: 2.5; f/u: 2.5 Summary Effect: +0.01, NS BMI (kg/m^2) Intervention: baseline: 33.6; f/u: 32.8 Comparison: baseline: 34.5; f/u: 33.9 Summary Effect: -0.2 kg/m^2, NS **Paper conclusions**: can be effectively disseminated using different implementation strategies that are tailored to the workplace
Author, Year: Sternfeld et al., 2009 **Study Design:** iRCT **Suitability of Design**: Greatest **Quality of Execution**: Good Study Arm(s): Single Intent: Diet+PA Type of worksite: healthcare delivery system (administrative, financial, regulatory, technical, professional, and other support services)	**Sample size:** Intervention: 351 Control: 436 **Demographics:** Intervention Mean age: 44.8 yrs Gender: 72.9% female Race/ethnicity: 31.6% White, 7.1% Black or AA, 8.0% Asian, 4.0% Hispanic or Latino, 49.3% mixed/unknown SES: NR Prevalence of overweight or obesity: 65% Control Mean age: 43.5 yrs Gender: 75.5% female Race/ethnicity: 43.1% White, 7.6% Black or AA, 8.9% Asian, 4.1% Hispanic or Latino, 36.2% mixed/unknown SES: NR	**Location (urbanicity):** Northern CA, USA (NR) **Intervention duration:** 4mo **When intervention occurred:** 2006 **Intervention:** Intensity: moderate Component(s): SM+GS+SS+FB+MS Device(s): computer/website, mobile/apps *Intervention*: Weekly e-mail program designed to increase FV and PA, and to decrease of saturated fats, trans fats, and added sugars. Participants choose paths (increasing PA; increasing FV; or decreasing fats and sugars). Messages are specific to path and are highly tailored to each individual. The core of each email message is four to six individually tailored, small-step goals. The participant chooses one or two of those goals for the week. Personal home page with tips for achieving the selected goal(s), along with weekly health note, a simulation tool that allows participants to see how a particular behavioral change moves them closer	FV (cup/d) Intervention: baseline: 2.5 Comparison: baseline: 2.4 Adjusted Beta: 0.2 cup/d, p=0.03 Added sugar (g/d) Intervention: baseline: 15.5 Comparison: baseline: 17.3 Adjusted Beta: -2.1 g/d, p=0.08 Saturated fat (g/d) Intervention: baseline: 12.2 Comparison: baseline: 12.0 Adjusted Beta:-1.0 g/d, p=0.01 Trans fat (g/d) Intervention: baseline: 1.9 Comparison: baseline: 2.0 Adjusted Beta: -0.3 g/d, p=0.02 MVPA (min/wk) Intervention: baseline: 248 Comparison: baseline: 206 Adjusted Beta: 49.5 min/wk, p<0.01

Study	Study Sample	Intervention Characteristics	Results
	Prevalence of overweight or obesity: 62.2%	to or further away from meeting national recommendations; a progress-tracking tool; a review of possible barriers; a discussion board; and links to additional resources. Reminder messages are sent. Messages every week for 2 months and then every other week for an additional 2 months. **Comparison**: no contact during intervention, assessment with feedback prior to intervention.	Sedentary behavior (min/wk): Intervention: baseline: 600 Comparison: baseline: 613 Adjusted Beta: -59.8 min/wk, p=0.05 **Paper conclusions**: e-mail–based dietary and physical activity intervention, resulted in significant improvements in both diet and physical activity
Author, Year: Cook et al., 2015 **Study Design:** iRCT **Suitability of Design**: Greatest **Quality of Execution**: Fair Study Arm(s): Single Intent: Diet + PA Type of worksite: large global information technology company	**Sample size:** Intervention: 138 Control: 140 **Demographics:** <u>Intervention</u> Age: 46.4% 50-54; 34.1% 55-59; 15.9% 60-64; 3.6% 65-69 Gender: 29.0% female Race/ethnicity: 91.3% White; 2.2% Black or African American; 1.4% Asian; 2.9% Hispanic or Latino; 0.7% Native Hawaiian or Pacific Islander; 3.6% other/unknown SES: 4.3% <$60K; 67.4% <u>></u>%100K <u>Control</u> Age: 52.9% 50-54; 25.7% 55-59; 15.7% 60-64; 5.7% 65-69 Gender: 35.7% female Race/ethnicity: 87.9% White; 4.3% Black or African American; 3.6% Asian; 2.9% Hispanic or Latino; 0.7% Native Hawaiian or Pacific Islander; 0.7% American Indian/Alaska Native; 2.8% other/unknown	**Location (urbanicity):** Massachusetts and California, US (NR) **Intervention duration:** 3mo **When intervention occurred:** 2012-2013 **Intervention:** Intensity: NR Component(s): SM+FB+GS+MS Device(s): computer/website *Intervention*: Web-based multimedia program containing information and guidance on the major health promotion topics of healthy aging, diet, physical activity, stress management, and tobacco use. Tailored feedback based on survey responses; all other information was standard. Survey included information about setting goals. PA goals were set and progress was tracked on website. **Comparison**: wait list control	<u>Eating Practices (part of the Weight Control Assessment)</u> Adjusted summary effect: +0.1 (0.0, 0.2) <u>Leisure time physical activity (Godin Leisure-Time Exercise Questionnaire)</u> Adjusted summary effect: +5.0 (-0.7, 10.6) <u>BMI (kg/m^2) (self-reported)</u> Adjusted summary effect: +0.1 kg/m2 (-0.3, 0.4) <u>Distress (15-item scale)</u> Adjusted summary effect: +0.1 (0.0, 0.1) **Paper conclusions**: Web-based health promotion program showed promise for making a significant contribution to the short-term dietary and exercise practices of older working adults. Gender effects suggest that the program effects on exercise are due mainly to improvements among women.

Study	Study Sample	Intervention Characteristics	Results
	SES: 2.9% <$60K; 72.9% ≥%100K		
Author, Year: Lippke et al., 2015 **Study Design:** iRCT **Suitability of Design**: Greatest **Quality of Execution**: Fair Study Arm(s): Nonintenders, Intenders, Actors Intent: Diet + PA Type of worksite: shiftworkers (e.g., train drivers, ticket inspectors, track workers)	**Sample size:** Intervention: 498 Control: 62 **Demographics:** Intervention Mean age: 43.85 yrs Gender: 20.2% female Race/ethnicity: NR SES: NR Control Mean age: 43.85 yrs Gender: 21.2% female Race/ethnicity: NR SES: NR	**Location (urbanicity):** Germany (NR) **Intervention duration:** 1mo **When intervention occurred:** 2006-2008 **Intervention:** Nonintenders Arm Intensity: moderate Component(s): GS Device(s): computer/internet *Intervention*: Package was specifically used for employees not intending to adopt the recommended behaviors. Participants were asked to set behavioral goals for the next 3 weeks. The instructions specified to set small steps toward reaching the larger goal of becoming more physically active during leisure time and eating at least 5 portions of fruit and vegetables daily. Goal setting was addressed again by asking people to sum up, by checking the different options for becoming more physically active and eating healthier that they could concretely consider for themselves. Intenders Arm Intensity: moderate Component(s): GS Device(s): computer/internet *Intervention*: Package was specifically intended for employees who have set a goal to change their behavior. Participants were asked to name up to 3 personal behavioral goals to meet the target of being physically active 3 times a week for 30 minutes or longer as well as to eat 5 portions of fruits and	FV (serv/d) Nonintenders: baseline: 2.0; f/u: 2.9 Comparison: baseline: 1.5; f/u: 2.5 Summary Effect: -0.1 serv/d Intenders: baseline: 2.6; f/u: 3.3 Comparison: baseline: 2.3; f/u: 2.3 Summary Effect: +0.8 serv/d Actors: baseline: 3.5; f/u: 4.4 Comparison: baseline: 3.6; f/u: 3.5 Summary Effect: +1.0 serv/d PA (min/wk) Nonintenders: baseline: 66.0; f/u: 115.0 Comparison: baseline: 40.5; f/u: 62.0 Summary Effect: +27.5 min/wk Intenders: baseline: 90.0; f/u: 135.0 Comparison: baseline: 132.0; f/u: 50.0 Summary Effect: +127.0 min/wk Actors: baseline: 240.0; f/u: 190.0 Comparison: baseline: 260.0; f/u: 230.0 Summary Effect: -20.0 min/wk **Paper conclusions**: Matching intervention to motivational readiness of employees can make a health promotion program effective.

Study	Study Sample	Intervention Characteristics	Results
		vegetables each day. These goals were then displayed on the next pages, always 1 goal on 1 slide, with the request that the participants generate an action plan. Actors Arm Intensity: moderate Component(s): GS Device(s): computer/internet *Intervention*: Relapse prevention program, Action control and coping plans were addressed. Individuals were asked to reflect on those actions and situations (showed on a respective page with the retrieved information), and on whether they would like to adjust aspects of them to maintain this behavior in the future. If the desire for change was expressed, individuals could record their new, adjusted action plan. In this they were asked to generate up to 3 potential barriers to being active, and strategies on how to overcome these barriers. **Comparison**: treated control, received general health information, personalized feedback, and a health education session	
Author, Year: Bennett et al., 2012 **Study Design:** gRCT **Suitability of Design**: Greatest **Quality of Execution**: Fair Study Arm(s): Single Intent: cardiovascular disease prevention	**Sample size:** Intervention: 72 Control: 73 **Demographics:** <u>Intervention</u> Mean age: 39.7 yrs Gender: 72% female Race/ethnicity: 86% White, 7% Black or African American, 7% Hispanic or Latina, 4% Asian, 3% other/more than one race SES: 13% less than Bachelor's degree, 47% Bachelor's degree, 40% Master's degree or higher	**Location (urbanicity):** various locations across US, international aid group to Africa and Asia (NR) **Intervention duration:** 6mo **When intervention occurred:** NR **Intervention:** Intensity: moderate Component(s): CC+SM Device(s): computer/website *Intervention*: Animated and narrated lessons supported by other interactive learning elements such as self-assessments, simulation tools, short videos, and	<u>Leisure time physical activity (Godin Leisure-Time Exercise Questionnaire)</u> Intervention: baseline: 40.7; f/u: 51.9 Comparison: baseline: 41.5; f/u: 43.8 ITT Adjusted summary effect: +8.9, p=0.07 <u>BF (%)</u> Men Intervention: baseline: 24.2; f/u: 24.5 Comparison: baseline: 21.8; f/u: 22.6 ITT Adjusted summary effect: -0.5%, p=0.63 Women

Study	Study Sample	Intervention Characteristics	Results
Type of worksite: manager at various large companies (private university, city and county government, international aid organization, transportation company, hospital, travel service, health and fitness provider)	<u>Control</u> Mean age: 43.2 yrs Gender: 56% female Race/ethnicity: 79% White, 10% Black or African American, 7% Hispanic or Latina, 3% Asian, 8% other/more than one race SES: 27% less than Bachelor's degree, 39% Bachelor's degree, 34% Master's degree or higher	reading materials. Web-based coaching and webinars. Instructed to spend at least 10 hours reviewing the program, an average of half an hour each week. **Comparison**: untreated control	Intervention: baseline: 30.8; f/u: 30.5 Comparison: baseline: 31.1; f/u: 31.3 ITT Adjusted summary effect: -0.5%, p=0.53 <u>BMI (kg/m^2)</u> Men Intervention: baseline: 29.9; f/u: 30.3 Comparison: baseline: 27.4; f/u: 27.3 ITT Adjusted summary effect: +0.5 m/kg^2, p=0.42 Women Intervention: baseline: 26.8; f/u: 26.6 Comparison: baseline: 26.9; f/u: 27.0 ITT Adjusted summary effect: -0.4m/kg^2, p=0.37 <u>Distress</u> Intervention: baseline: 15.0; f/u: 11.5 Comparison: baseline: 12.7; f/u: 12.7 ITT Adjusted summary effect: -3.8, p=0.01 <u>Hostile attitudes</u> Intervention: baseline: 16.6; f/u: 15.8 Comparison: baseline: 15.1; f/u: 15.4 ITT Adjusted summary effect: -1.0, p=0.10 **Paper conclusions**: intervention associated with improvements in dietary self-efficacy, exercise, and reductions in distress symptoms.
Author, Year: Widmer et al., 2016 **Study Design:** other design with concurrent comparison group (retrospective cohort	**Sample size:** Intervention:651 Control: 14,173 **Demographics:** <u>Intervention (monthly use)</u> Mean age: 47.8 yrs	**Location (urbanicity):** 42 states, US (NR) **Intervention duration:** 12mo **When intervention occurred:** 2011-2014 **Intervention:** Intensity: moderate	<u>Weight (lb)</u> Intervention: baseline: 154.2; f/u: NR Comparison: baseline: 196.3; f/u: NR Adjusted Difference: -1.8 lb, NS <u>SBP (mmHg)</u>

Study	Study Sample	Intervention Characteristics	Results
with concurrent comparison) **Suitability of Design**: Greatest **Quality of Execution**: Fair Study Arm(s): Single Intent: cardiovascular disease prevention Type of worksite: various (governmental, white collar, blue collar, and other occupations)	Gender: 64.3% female Race/ethnicity: 76.2% White SES: 74.3% government workers, 7.5% white collar workers, 12.3% blue collar workers <u>Intervention (weekly use)</u> Mean age: 48.9 yrs Gender: 62.5% female Race/ethnicity: 73.9% White SES: 72.5% government workers, 5.4% white collar workers, 14.7% blue collar workers <u>Intervention (semi-weekly use)</u> Mean age: 49.9 yrs Gender: 60.0% female Race/ethnicity: 80.0% White SES: 71.2% government workers, 7.7% white collar workers, 17.7% blue collar workers <u>Control</u> Mean age: 47.7 yrs Gender: 50.3% female Race/ethnicity: 67.9% White SES: 83.2% government workers, 4.9% white collar workers, 8.6% blue collar workers	Component(s): CC+SM+GS+FB+MS+SS Device(s): computer/website, mobile/apps *Intervention*: online and smartphone-based portal allows to log and track, provides educational information, and provides actionable tasks to improve health. Participants track their own health information as they progress through the program. Program is user-friendly and provides interactive access to health status information, tasks, targets, and plans that encourage the adoption and maintenance of a healthier lifestyle for improved wellness. May access coach online or at health center. Reminders to complete tasks are sent via email or SMS text messaging. **Comparison**: untreated (non-participant); chose not to participate	Intervention: baseline: 123.5; f/u: 120.94 Comparison: baseline: 123.6; f/u: NR Adjusted Difference: -2.6 mmHg, NS <u>HDL (mg/dL)</u> Intervention: baseline: 51.9; f/u:52.8 Comparison: baseline: 52.2; f/u: NR Adjusted Difference: +0.90 mg/dL, NS <u>Glucose (mg/dL)</u> Intervention baseline: 103.2; f/u: 99.1 Comparison: baseline: 98.8; f/u: NR Adjusted Difference: -4.2 mg/dL, NS **Paper conclusions**: a widely-distributed, worksite health promotion digital health intervention is associated with improved weight loss, blood pressure control, and lipid profiles in a frequency dependent fashion.
Author, Year: Hughes et al., 2011 **Study Design:** iRCT **Suitability of Design**: Greatest	**Sample size:** Intervention (Coach): 150 Intervention (RealAge): 135 Control: 138 **Demographics:** <u>All Groups Combined</u> Mean age: 51 yrs	**Location (urbanicity):** Chicago, IL (urban) **Intervention duration:** 12mo (6mo measurement) **When intervention occurred:** February 2006 – July 2007 **Intervention:**	<u>Energy from Fat (%)</u> COACH: NR Comparison: NR Summary Effect: -1.9, p=0.03 RealAge: NR Comparison: NR Summary effect: -1.3, p=0.19

Study	Study Sample	Intervention Characteristics	Results
Quality of Execution: Good Study Arm(s): COACH, RealAge Intent: Diet + PA Type of worksite: University	Gender: 82% female Race/ethnicity: 38% White, 45% Black or African American, 11% Hispanic, 4% Asian, 1% American Indian/Alaska Native, 1% other SES: 20% senior management, 26% professionals, 44% clerical or administrative support, 8% service, craft, or laborer	COACH Intensity: low Component(s): CC+GS Device(s): computer/website, telephone *Intervention*: Initial in-person meeting with coach. The coach reviewed health-related goals and negotiated an action plan to meet those goals. The plan could be revised and expanded over time. During the first week the coach called participants by phone to ask them about their success in accessing resources needed to implement the plan. Participants who reported difficulty returned for a second meeting to revise the plan to reflect attainable goals. Thereafter, the coach contacted participants via e-mail or telephone biweekly during months 1 through 6 and monthly during months 7 through 12. During these contacts, the coach and participant reevaluated the plan, including the negotiation of other goals and related actions. The coach repeated the in-person assessment with participants at 6 and 12 months (and more frequently if needed). RealAge Intensity: low Component(s): GS+FB Device(s): computer/website *Intervention*: E-mail message sent to participants to access a website. The website contained test, which participants completed. After completion the website generated individual feedback and indicated areas to improve health. The website was available to allow participants to select behaviors and create plans to meet behavioral goals.	<u>FV (serv/d)</u> COACH: NR Comparison: NR Summary Effect: 4.4 serv/d, p<0.001 RealAge: NR Comparison: NR Summary effect: 1.5 serv/d, p=0.220 <u>MPA (min)</u> COACH: NR Comparison: NR Summary Effect: 1.1 min, p<0.013 RealAge: NR Comparison: NR Summary effect: 0.1, p=0.84 <u>VPA (min)</u> COACH: NR Comparison: NR Summary effect: 0.6, p=0.27 RealAge: NR Comparison: NR Summary effect: 0.28, p=0.64 <u>BMI (kg/m^2)</u> COACH: NR Comparison: NR Summary effect: -0.44 kg/m^2, p=0.34 RealAge: NR Comparison: NR Summary effect: -0.06 kg/m^2, p=0.91 <u>Stress</u> Coach: no significant differences RealAge: no significant differences

Study	Study Sample	Intervention Characteristics	Results
		Comparison: light health education, personally handed printed health-promotion materials (included a listing of health-promotion programs and services offered by the university and other community-based organizations)	**Paper conclusions**: COACH participants were twice as likely to use the COACH intervention as RealAge participants were to use the RealAge intervention. COACH participants experienced twice the number of positive outcomes that control participants experienced.