

## Poster – #EIE2021

Non-communicable disease prevention in Kosovo: mixed-methods study to assess and improve motivational counselling for healthier lifestyles in primary healthcare.

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### *Research aim*

This study aims to tailor approaches for improving health behaviors of PHC users. The first objective is to quantitatively assess the uptake of motivational counselling and the impact on adherence to health behaviors and participants' stages of health behavior change. The second objective is to qualitatively describe experiences towards motivational counselling and barriers for health behavior change.

### *Methods*

This mixed methods study is part of the Kosovo Non- Communicable Disease Cohort, which is nested into AQH. First, we quantitatively assessed the uptake of motivational counselling, health behaviors, and stages of health behavior change based on Stages of Change Model using data from the first cohort follow-up (n=861). Study participants are consecutive PHC users who were 40 years of age and over on the date of the interview. Data was collected through structured telephone interviews. Secondly, in-depth interviews were conducted with 26 cohort participants who received motivational counselling. Data was analyzed using the framework method to describe experiences qualitatively.

### *Key findings*

Quantitative study: Only 19.5% received at least one motivational counselling session. 21.0% of the study sample are smokers, and among those, 76.2% are in the precontemplation stage for changing smoking behavior. 51.7% of the study sample do not adhere to WHO recommendations for physical activity and mean BMI of the study population is (31.0±5.7) which classifies as obese.

Qualitative study: Participants that received motivational counselling describe positive experiences and willingness to start to change their health behaviors. Main barriers for physical activity behaviors are: lack of outdoor and indoor facilities for physical activity; weak health conditions; insufficient knowledge on types of exercises and lack of time. Main barriers for smoking behaviors are: insufficient information on ways to quit smoking and factors related to stress. Furthermore, study participants presented several ideas for improving the PHC intervention.

### *Discussion*

How can integration of novel technologies (ex: mobile health Apps, Fitbit watches etc.) facilitate the process of health behavior change? What are the best ways to improve health behaviors in primary healthcare setting for patients with NCDs?