

PAHA Project, 6 weeks intervention plan (including exercise, exercise counselling and behavioral change)

Exercise intervention has been designed following evidence statements and summary of recommendations for individualized exercise prescription from ACSM Position Stand 2011

Weeks	Exercise Sessions			Action - Intervention Exercise Counseling themes	Behavioural Change
	S1 (with PT)	S2	S3		
W0	Assessment and information of the project	Physical Activity	Physical Activity	Information day presenting the program. No action on behavioural change education. Handover the accelerometer. Complete the PAR-Q+ questionnaire.	None.
W1	WHY? WHAT? HOW? Exercise counseling followed by a low intensity 30 minutes light aerobic exercise session.	Structured Exercise 20min AER light to moderate intensity Single set of RT involving each major muscle group (4 exercises); 10 to 15 reps/2min recovery	Structured Exercise 20min AER light to moderate intensity Single set of RT involving each major muscle group (4 exercises); 10 to 15 reps/2min recovery	Focused in Why? What and How?	Completion of physical activity mediators survey composed for the program, based on the referenced questionnaires (1,3).
W2	Structured Exercise 25min AER light to moderate intensity Single set of RT involving each major muscle group (4 exercises); 10 to 15 reps/2min recovery	Structured Exercise 25min AER light to moderate intensity Single set of RT involving each major muscle group (4 exercises); 10 to 15 reps/2min recovery	Structured Exercise 25min AER light to moderate intensity Single set of RT involving each major muscle group (4 exercises); 10 to 15 reps/2min recovery	Understanding Intensity and learning how to use it.	Using the STAGE model, and the results of the questionnaire, assessment of the participant, development of the action plan according to the PT Training Material guidance. Agreement and written declaration of the client adhering to the agreed action plan. Encouraging participants to conduct a diary or activity and actions log during the overall length of the program.
W3	Structured Exercise 30min AER moderate intensity 2 sets of RT	Structured Exercise 30min AER moderate intensity 2 sets of RT	Structured Exercise 25min AER moderate intensity 2 sets of RT	Different modes of exercise and its impact in health.	Discussion of individual's self-efficacy and coping skills. Providing feedback based on the survey

	involving each major muscle group (4 exercises); 10 to 15 reps/2min recovery	involving each major muscle group (4 exercises); 10 to 15 reps/2min recovery	involving each major muscle group (4 exercises); 10 to 15 reps/2min recovery		results agreement of actions to be completed. (4)
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AER: aerobic exercise; RT: resistance training

Weeks	Exercise Sessions			Action - Intervention Exercise Counseling	Behavioural Change
	S1 (with PT)	S2	S3		
W4	Structured Exercise 30min AER moderate intensity 2 sets of RT involving each major muscle group (4 exercises); 8 to 12 reps/2min recovery	Structured Exercise 30min AER moderate intensity 2 sets of RT involving each major muscle group (4 exercises); 8 to 12 reps/2min recovery	Structured Exercise 30min AER moderate intensity 2 sets of RT involving each major muscle group (4 exercises); 8 to 12 reps/2min recovery	Progression guidelines and rationale about progressive increase of exercise load.	Development of the action and coping plans for the regular controlled and non-controlled physical activity. Obtain written commitment from the client. (2)
W5	Structured Exercise 30min AER moderate intensity 2 sets of RT involving each major muscle group (4 exercises); 8 to 12 reps/2min recovery	Structured Exercise 30min AER moderate intensity 2 sets of RT involving each major muscle group (4 exercises); 8 to 12 reps/2min recovery	Structured Exercise 30min AER moderate intensity 2 sets of RT involving each major muscle group (4 exercises); 8 to 12 reps/2min recovery	Pre/post exercise practice (warm-up/cool down) Why? What? How?	Review adherence to the developed action, coping and self-efficacy improvement plans. Discussing the intermediate results and adjust plan according to the progress.
W6	Structured Exercise 30min AER moderate intensity 2 sets of RT involving each major muscle group (4 exercises); 8 to 12 reps/2min recovery	Structured Exercise 30min AER moderate intensity 2 sets of RT involving each major muscle group (4 exercises); 8 to 12 reps/2min recovery	Structured Exercise 30min AER moderate intensity 2 sets of RT involving each major muscle group (4 exercises); 8 to 12 reps/2min recovery	Exercise Practice guidelines: Enjoying exercise practice in a safe and tailored programme. Integrating physical activity and exercise within lifestyle. <i>Give a T-Shirt for the completing participants.</i>	Reinforce the client's competence, relatedness and autonomy achieved during the 5 weeks period and develop a further coping and action plan for the 3 months period. Completion of questionnaire as per initial questionnaire (w1) adding the post-evaluation type questions for the 6 weeks intervention program.

Follow up					
3M				Wear the key for one week in month 3.	On-line submission of the action, physical activity and coping plans for the next 3 months period. Feedback from clients on the faced and experienced challenges.
6M				Wear the key for one week in month 6. <i>Hand over the keys to the participants as a gift.</i>	Feedback via on-line questionnaire from clients on the faced and experienced challenges, progress and lifestyle changes.

References for Physical Activity Plans:

- (1) Garber, Carol Ewing; Blissmer, Bryan; Deschenes, Michael R.; Franklin, Barry A.; Lamonte, Michael J.; Lee, I-Min; Nieman, David C.; Swain, David P. **Quantity and Quality of Exercise for Developing and Maintaining Cardiorespiratory, Musculoskeletal, and Neuromotor Fitness in Apparently Healthy Adults: Guidance for Prescribing Exercise.** *Medicine & Science in Sports & Exercise.* 43(7):1334-1359, July 2011. doi: 10.1249/MSS.0b013e318213fefb
- (2) Chodzko-Zajko, Wojtek J.; Proctor, David N.; Fiatarone Singh, Maria A.; Minson, Christopher T.; Nigg, Claudio R.; Salem, George J.; Skinner, James S. **Exercise and Physical Activity for Older Adults.** *Medicine & Science in Sports & Exercise.* 41(7):1510-1530, July 2009. doi: 10.1249/MSS.0b013e3181a0c95c

References for Behavioural Change Process Definition:

- (1) Bess H. Marcus, LeighAnn H. Fortsyth: **Motivating People to be Physically Active** (p. 21,23, 57 -76)
- (2) Mark Conner: **Initiation and Maintenance of Health Behaviors (in Applied Psychology: An international review, 2008, 57(1), p 42-50)**
- (3) Amelie U. Wiedermann, Sonia Lippke, Tabea Reuter, Jochen P. Ziegelmann, Benjamin Schütz: **The more the better? The number of plans predicts health behavior change** (in *Applied Psychology: Health and Wellbeing*, 2011, 3(1), p 87-106)
- (4) Amelie U. Wiedermann, Sonia Lippke, Tabea Reuter, Jochen P. Ziegelmann, Ralf Swartzter: **How planning facilitates behavior change: Additive and interactive effects of a randomized controlled trial** (In: *European Journal of Social Psychology*, 2011, 41.p 42-51.)