Intervention Function	Potentially Useful Policy Categories	Does the Category meet the APEASE criteria? (Affordability, Practicability, Effectiveness/Cost-Effectiveness, Acceptability, Side-effects/Safety, Equity)?

Table 1 The APEASE criteria for designing and evaluating interventions

Criterion	Description
Affordability	Interventions often have an implicit or explicit budget. It does not matter how effective, or even cost-effective it may be if it cannot be afforded. An intervention is affordable if within an acceptable budget it can be delivered to, or accessed by, all those for whom it would be relevant or of benefit.
Practicability	An intervention is practicable to the extent that it can be delivered as designed through the means intended to the target population. For example, an intervention may be effective when delivered by highly selected and trained staff and extensive resources but in routine clinical practice this may not be achievable.
Effectiveness and cost-effectiveness	Effectiveness refers to the effect size of the intervention in relation to the desired objectives in a real world context. It is distinct from efficacy which refers to the effect size of the intervention when delivered under optimal conditions in comparative evaluations. Cost-effectiveness refers to the ratio of effect (in a way that has to be defined, and taking account of differences in timescale between intervention delivery and intervention effect) to cost. If two interventions are equally effective then clearly the most cost-effective should be chosen. If one is more effective but less cost-effective than another, other issues such as affordability, come to the forefront of the decision making process.
Acceptability	Acceptability refers to the extent to which an intervention is judged to be appropriate by relevant stakeholders (public, professional and political). Acceptability may differ for different stakeholders. For example, the general public may favour an intervention that restricts marketing of alcohol or tobacco but politicians considering legislation on this may take a different view. Interventions that appear to limit agency on the part of the target group are often only considered acceptable for more serious problems [17].
Side-effects/ safety	An intervention may be effective and practicable, but have unwanted side-effects or unintended consequences. These need to be considered when deciding whether or not to proceed.
Equity	An important consideration is the extent to which an intervention may reduce or increase the disparities in standard of living, wellbeing or health between different sectors of society.

Table 2.1 BCW intervention function definitions and examples

Intervention function	Definition	Example of intervention function
Education	Increasing knowledge or understanding	*Providing information to promote healthy eating*
Persuasion	Using communication to induce positive or negative feelings or stimulate action	*Using imagery to motivate increases in physical activity*
Incentivisation	Creating an expectation of reward	*Using prize draws to induce attempts to stop smoking*
Coercion	Creating an expectation of punishment or cost	*Raising the financial cost to reduce excessive alcohol consumption*
Training	Imparting skills	*Advanced driver training to increase safe driving*
Restriction	Using rules to reduce the opportunity to engage in the target behaviour (or to increase the target behaviour by reducing the opportunity to engage in competing behaviours)	*Prohibiting sales of solvents to people under 18 to reduce use for intoxication*
Environmental restructuring	Changing the physical or social context	*Providing on-screen prompts for GPs to ask about smoking behaviour*
Modelling	Providing an example for people to aspire to or imitate	*Using TV drama scenes involving safe-sex practices to increase condom use*
Enablement	Increasing means/reducing barriers to increase capability (beyond education and training) or opportunity (beyond environmental restructuring)	*Behavioural support for smoking cessation, medication for cognitive deficits, surgery to reduce obesity, prostheses to promote physical activity*

Table 2.7 BCW policy categories

Policy Category	Definition	Example
Communication/ marketing	Using print, electronic, telephonic or broadcast media	Conducting mass media campaigns
Guidelines	Creating documents that recommend or mandate practice. This includes all changes to service provision	Producing and disseminating treatment protocols
Fiscal measures	Using the tax system to reduce or increase the financial cost	Increasing duty or increasing anti-smuggling activities
Regulation	Establishing rules or principles of behaviour or practice	Establishing voluntary agreements on advertising
Legislation	Making or changing laws	Prohibiting sale or use
Environmental/ social planning	Designing and/ or controlling the physical or social environment	Using town planning
Service provision	Delivering a service	Establishing support services in workplaces, communities etc.

Table 2.4 Linking COM-B components to intervention functions

COM-B	Intervention functions
Influencing capability	
Knowledge	**Educate** about ways of enacting the desired behaviour or avoiding the undesired one
Skill	**Train** in cognitive, physical or social skills required for the desired behaviour or avoid the undesired one
Strength	**Train** or **enable** development of mental or physical strength required for the desired behaviour or to resist the undesired one
Stamina/ endurance	**Train** or **enable** endurance required for desired behaviour or sustained resistance to undesired one
Influencing opportunity	
Time	**Train** or **restructure the environment** to reduce time demand or competing time demands for desired behaviour (and additionally use **restriction** to reduce undesired behaviour)
Resources	**Restructure the environment** to increase social support and cultural norms for desired behaviour (and additionally use **restriction** to reduce undesired behaviour)
Location/ physical barriers	**Train** or **Restructure the environment** to provide cues and prompts for desired behaviour (and converse for undesired behaviour)
Interpersonal influences/ cultural expectations	**Restructure the social environment** or use **modelling** to shape people's ways of thinking
Influencing motivation	
Plans	**Educate, train** to form clearer personal rules/ action plans, and train to remember and apply the rules when needed
Evaluations	**Educate** or **persuade** to create more positive beliefs about desired, and negative ones about undesired, behaviour
Motives	**Persuade, incentivise, coerce, model** or **enable** to feel positively about the desired behaviour and negatively about the undesired one
Impulses/ inhibition	**Train** or **enable** to strengthen habitual engagement in the desired behaviour or weaken the undesired one
Responses	**Model** desired behaviour to induce automatic imitation

Reference

Mitchie S., Atkins, L., & West, R. (2014) The behaviour change wheel: A guide to designing interventions. *Silverback publishing, Great Britain.*