



경희대학교
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Personalized Coalesced Model based on Multidimensional Healthy Behavior Index for Lifestyle Adaptation



PhD. Public Defense Presentation

April 5th, 2021

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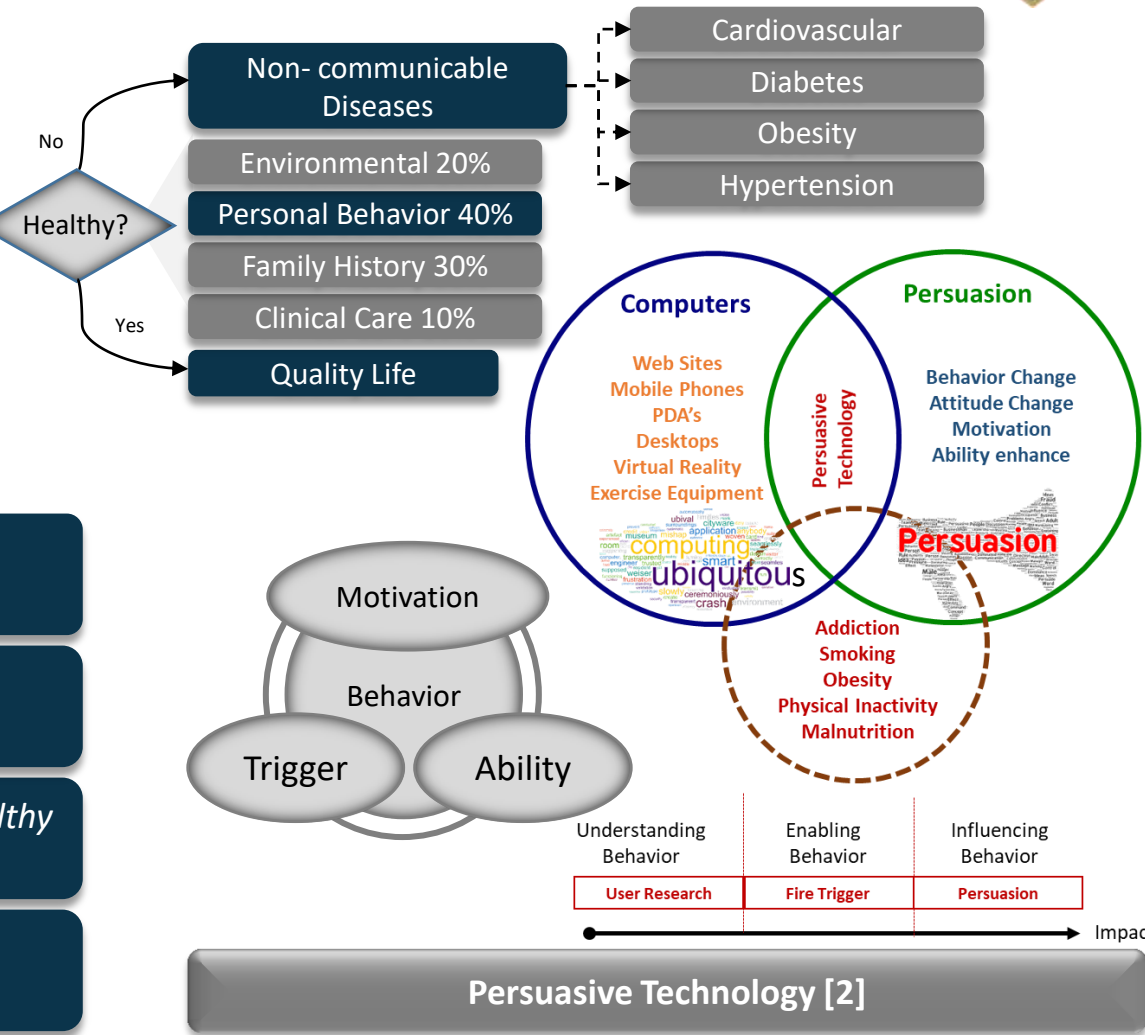
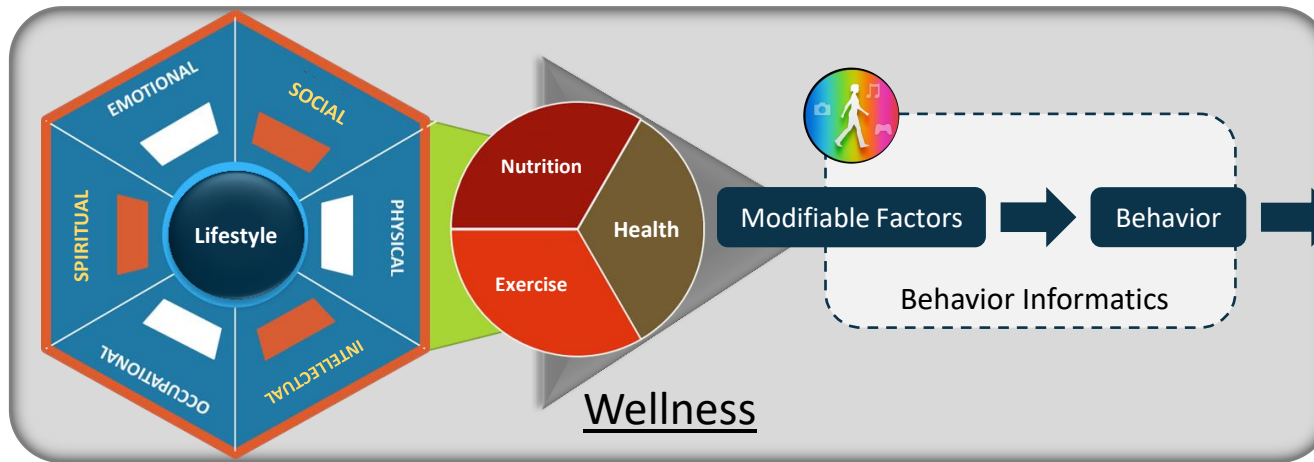
Ubiquitous Computing Laboratory
Kyung Hee University, Korea

Agenda



- **INTRODUCTION**
 - Background
 - Motivation
 - Problem Statement
 - Research Taxonomy
- **RELATED WORK**
 - Literature Review
 - Technical Review
 - Critical Analysis
- **PROPOSED APPROACH**
 - Overview
 - Methodology
 - Concept Mapping
- **EVALUATION**
 - Experiment setup
 - Results Analysis
- **CONCLUSION**

Introduction



- “Health is driven by multiple factors that are intricately— linked of which **personal behavior** is major component.” [1]
- Lifestyle is a combination of multiple modifiable and non-adaptable factors. Non-adaptable factors include family history, gender, age, ethnicity and many other [3].
- Major causes of non-communicable diseases are the modifiable factors like unhealthy diet, smoking, inactivity, drinking and sleeping and leads to behavior [4].
- The behavior adaption requires that three elements must converge at the same moment for a behavior to change: Motivation, Ability, and a Prompt. [2]

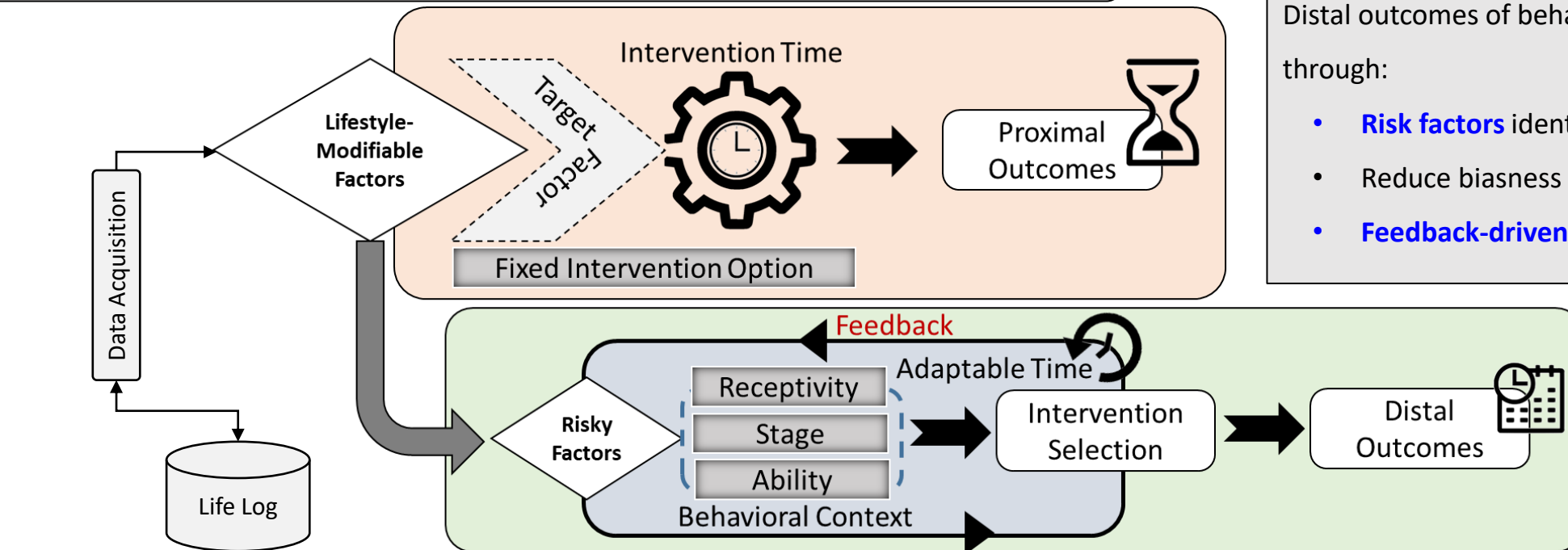
Motivation

- **Self Quantification** in digital wellness [5, 22]
- Healthy **habits formation** instead of fitness [26]
- **Pace-gap** between behavior theories and emerging technology [12]

Behavior Change Intervention Receptive Effect

Distal outcomes of behavior adaptation can be achieved through:

- **Risk factors** identification using life log [5, 15, 16]
- Reduce biasness using **implicit feedback** [21]
- **Feedback-driven** intervention reframing [23]



R

Homogeneous behavior stage based intervention

C

Identification of behavior context through life log

A

Increase receptivity of intervention

R

Coarse-grained behavior target

C

Stratification on the basis of behavior stage

A

Personalization supports the stimulation and attraction

R

Reasons

C

Characteristics

A

Advantages

Problem Statement

Problem Statement

Digital wellness deficient to achieve healthcare goal due to underutilization of personalized behavior **adaptation model** for **habit formation** and user **engagement retention**^[9,6,12,17,19].

Goal

Develop a comprehensive methodology in order to **quantify multidimensional factors** of behavioral context based **assessment** and **intervention**.

Requirements

R1

Factors Identification

- How to select **relevant lifestyle risk factors**?^[7,12]

R2

Behavioral Context Identification

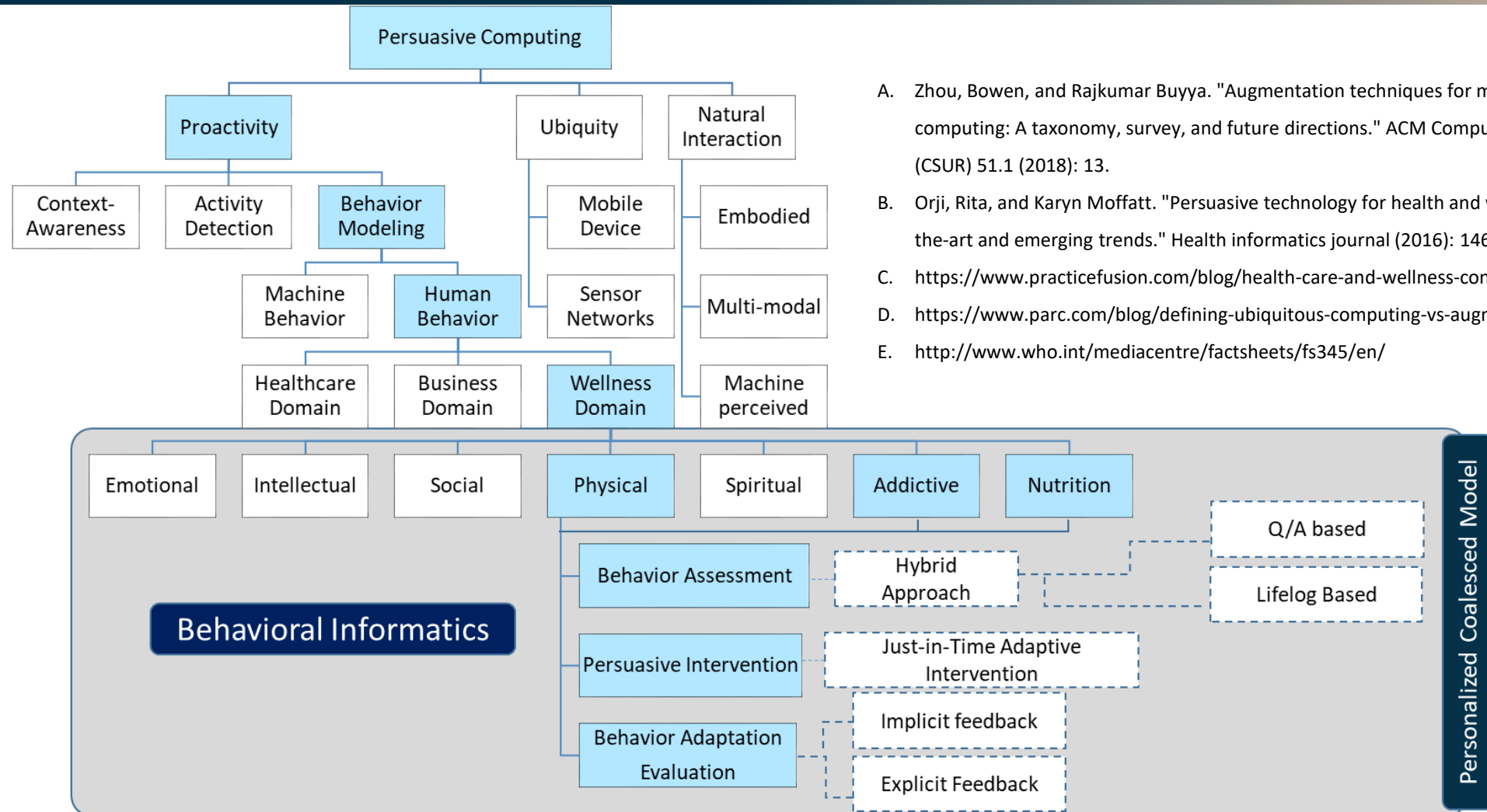
- How to recognize **behavioral stage**?^[14,16-18]

R3

Intervention Adaptation

- How to target **personalized adaptive intervention**?^[12,6,21]
- How to utilize feedback in **intervention reframing**?^[15,23]

Research Taxonomy [A-E]

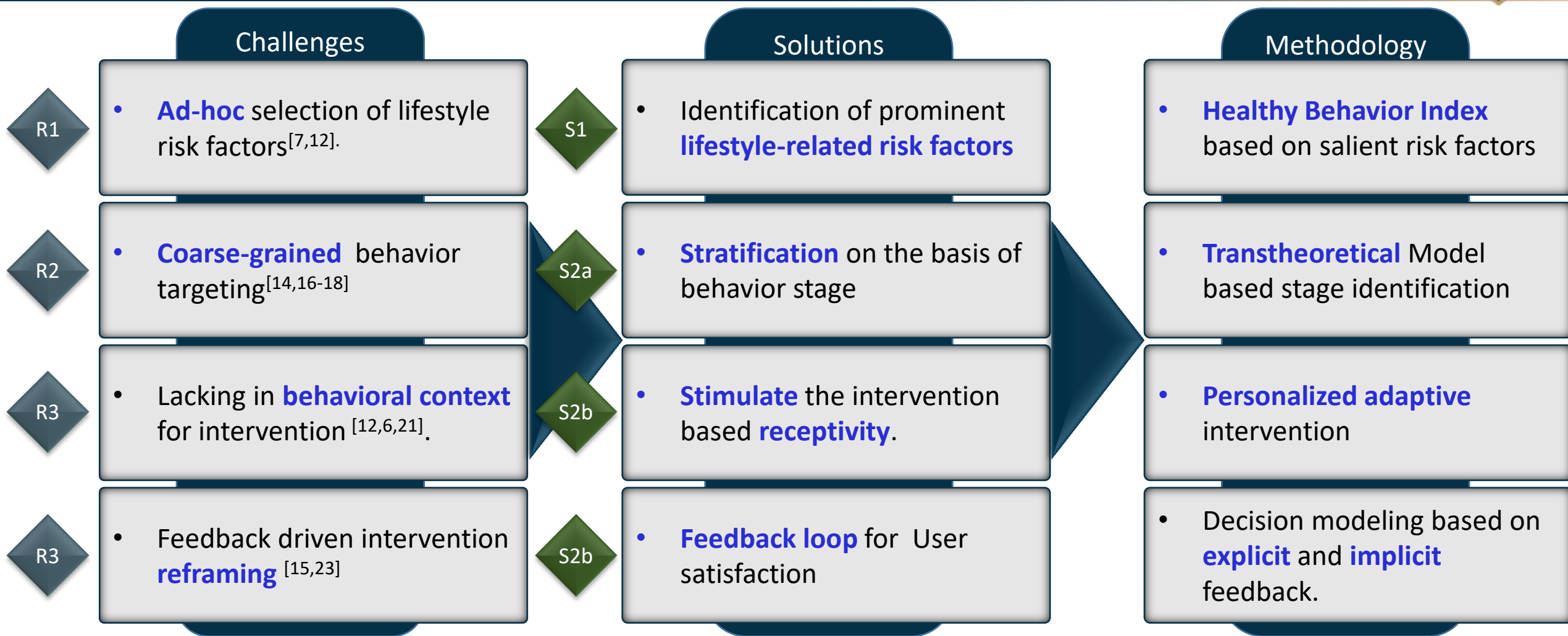


- A. Zhou, Bowen, and Rajkumar Buyya. "Augmentation techniques for mobile cloud computing: A taxonomy, survey, and future directions." ACM Computing Surveys (CSUR) 51.1 (2018): 13.
- B. Orji, Rita, and Karyn Moffatt. "Persuasive technology for health and wellness: State-of-the-art and emerging trends." Health informatics journal (2016): 1460458216650979.
- C. <https://www.practicefusion.com/blog/health-care-and-wellness-converging-concepts/>
- D. <https://www.parc.com/blog/defining-ubiquitous-computing-vs-augmented-reality/>
- E. <http://www.who.int/mediacentre/factsheets/fs345/en/>

Related Work

R3	R2	R1	References	Methodology	Limitations
Goal Target based fixed time intervention	Non graded Behavior Indication	Single Lifestyle Factor	[14] Arroggi et al. Evaluation of stAPP: intervention to reduce prolonged sitting. (2019)	<ul style="list-style-type: none"> Supports the self monitoring and feedback on behavior status. Focused on the reduction of sedentary behavior. Highlight the consequences of the behavior. 	<ul style="list-style-type: none"> Goal setting for the target behavior is missing. Habit formation and adaptation of behavior is not concerned. Indexing of the focused behavior is missing.
			[18] Dunn et al. Dietary self-monitoring through calorie. (2019)	<ul style="list-style-type: none"> Focused on dietary self-monitoring through calories-tracking Twice-weekly weight-loss podcasts to guide about the diet intake. Feedback on the recorded and tracked dietary behavior. 	<ul style="list-style-type: none"> Goal setting for the target behavior is missing. Indexing of the focused behavior is missing. Habit formation and adaptation of behavior is not concerned.
			[16] Baskerville et al. Effect of intervention on quitting smoking (2018)	<ul style="list-style-type: none"> It supports the user driven behavior goal setting to quit smoking Behavior feedback in term of financial and health benefits. Self monitoring of the behavior to enhance the motivation and crush the craving. 	<ul style="list-style-type: none"> Self-monitoring of behavior outcome is not focused. Review of behavioral goal is missing Habit formation is missing and no support for graded task.
			[17] Crane et al. A smartphone app to reduce excessive alcohol consumption (2018)	<ul style="list-style-type: none"> Provides information about health consequences and environment Informative intervention for reducing the alcohol consumption. Self monitoring of the behavior through feedback. 	<ul style="list-style-type: none"> Missing goal setting and action planning for addictive habits Grading of the behavior for self-quantification is not focused. Habit formation and adaptation of behavior is not concerned.
	Goal based Behavior Grading	Multiple Lifestyle Factor	[21] Kliemann et al. Development of the top tips habit-based weight loss app. (2019)	<ul style="list-style-type: none"> It supports the user driven behavior goal setting and action planning. Self monitoring of the behavior through feedback and its outcomes. Informative intervention to manage the diet for obese and overweight. 	<ul style="list-style-type: none"> Verification of behavioral goal is not concerned. Habit formation is missing and no support to grad behavior. Consequences of the behavior are not highlighted.
			[13] Gonzalez-Sanchez et al. Using a smartphone app in changing cardiovascular risk factors... (2019)	<ul style="list-style-type: none"> It supports the user driven behavior goal setting Informative intervention for Mediterranean diet and evaluation. Self monitoring of the behavior through feedback. 	<ul style="list-style-type: none"> Monitoring of behavior outcome is not focused. Review of behavioral goal is missing Habit formation is missing although support graded task.
			[15] Brindal et al. Weight loss maintenance and well-being (MotiMate) (2019)	<ul style="list-style-type: none"> Feedback on behavior monitoring, behavior outcomes and support self monitoring. It focuses on weight management through tracking of food and exercise. Weekly graphical report of diet and its impact on weight. 	<ul style="list-style-type: none"> Missing daily or weekly goal setting for diet and exercise. Behavior adaptation and framing are not focused.

Challenges, Solutions & Methodology



Proposed Idea

Existing Methodologies Focus on:

R1

- Specific Factor
- Log Visualization
- User derived goal
- Ignoring Vital Factors

R2

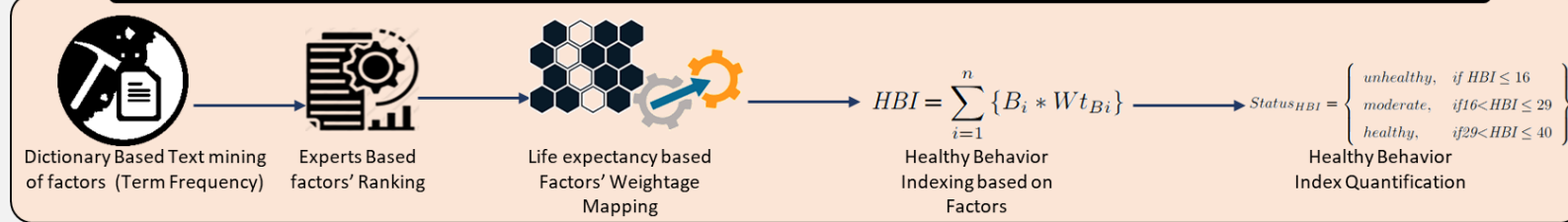
Existing approaches follows:

- One-size fits all
- Homogeneous behavior state

R3

- Time based Intervention
- Factor Status Feedback

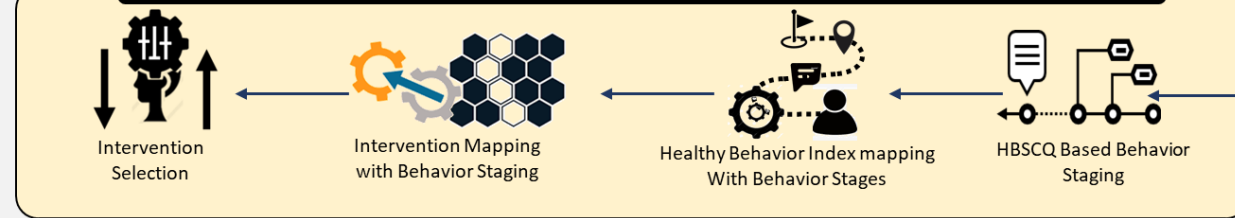
Solution 1: Healthy Behavior Index Building Process



S1

Identification of **prominent** lifestyle related **risk factors** having inter rate agreement with high **Cohen's Kappa**, and construction of comprehensive **Healthy Behavior Index** based on life expectancy based derived **weightage** [24].

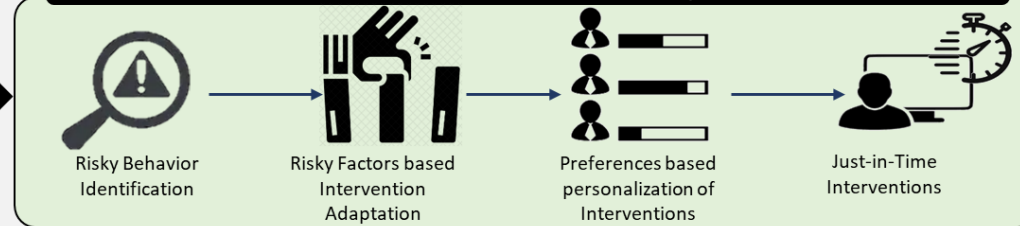
Solution 2a: Behavior Context based Intervention Mapping



S2a

Stratification by **Transtheoretical** model depends on **behavioral context through ensemble learner technique** [25]

Solution 2b: Intervention Adaptation



S2b

Personalized adaptive intervention to **stimulate** the **receptivity** and employ **feedback** through **risk factors' indexing** [5,22,24, 25].

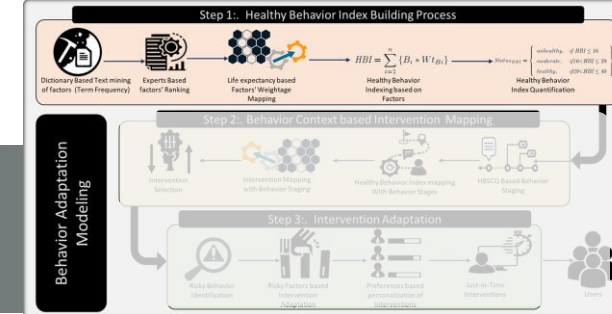
[24] Bilal et al. (2020). On computing critical factors based healthy behavior index for behavior assessment. *International journal of medical informatics*, 141, 104181.

[25] Bilal et al. (2020). Towards user-centric intervention adaptiveness: influencing behavior-context based healthy lifestyle interventions. *IEEE Access*, 8, 177156-177179.

Behavior Adaptation
Modeling

Solutions

Limitations



Solution 1: Healthy Behavior Index Generation

S1

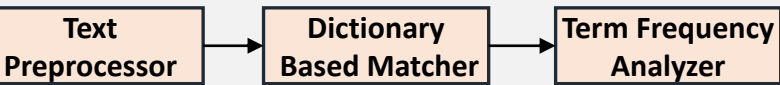
Workflow for Healthy Behavior Index Generation



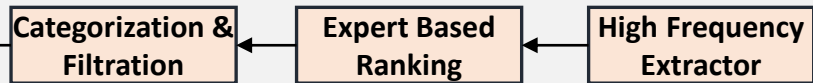
Documents

Contributing Factors Identification

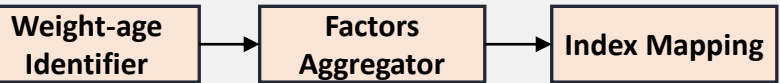
Wellness Term Frequency



Wellness Term Categorization



Wellness Term Weight-age and Mapping



$$1 \quad tf = \frac{\sum_{i=0}^n t}{N}$$

$$2 \quad k = \frac{\bar{P} - \bar{P}_e}{1 - \bar{P}_e} \quad (1)$$

$$\bar{P} = 0.9615 \quad (2)$$

$$\bar{P}_e = 0.5722 \quad (3)$$

$$k = 0.9100 \quad (4)$$

$$3 \quad f^i = \frac{1}{(N-1)M+1} \left(w_k x_i^k + \sum_{j \neq k} \sum_l w_j x_j^l \right)$$

$$HBI = \sum_{i=1}^n \{B_i * W_{IB_i}\}$$

Highlights of the idea

- Identifies the **Wellness Factors**, and **Categorization of factors** based on term frequency [24].
- Expert based **ranking of factors** for identification and authentication of wellness domain using Cohen's Kappa based on **inter-rater agreement** [24,25].
- Wellness **factors' weight-age** identification based on **life expectancy impact** [8].

Different to existing approaches

- Studies usually consider **single factor** or combination of 2 factors to analyze the behavior change [14,16-18].
- Correlation of multiple factors for the impact on behavior change are not considered for understanding the **holistic impact**.
- Linear aggregation** of the factors miss lead about the impact of factors on wellness [19].

[24] Bilal et al. (2020). On computing critical factors based healthy behavior index for behavior assessment. *International journal of medical informatics*, 141, 104181.



Index Generation

Solution-1a



Healthy Behavior Index

Context Mapping

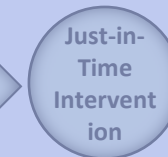
Solution-2a



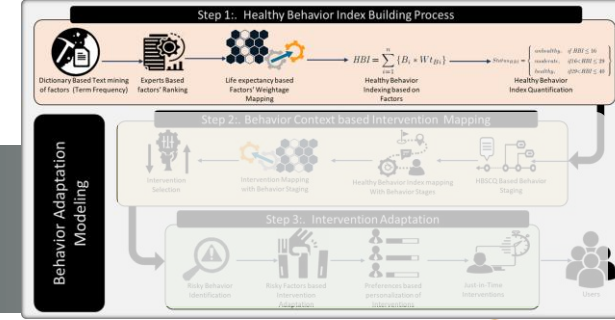
Behavior Context-Intervention

Adaptive Intervention

Solution-2b

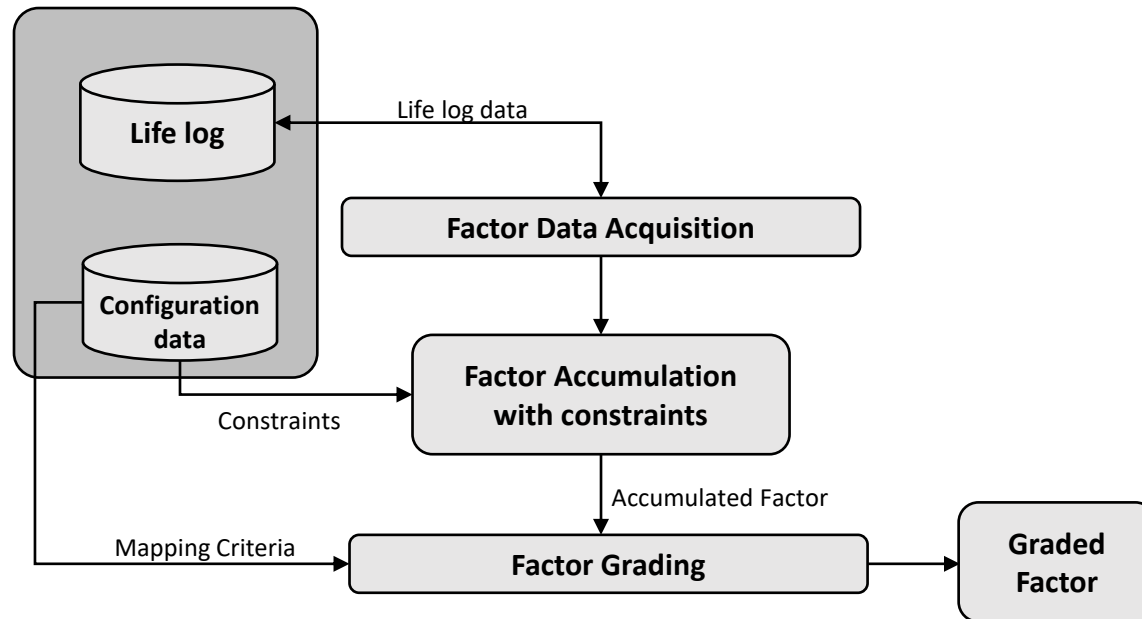


Just-in-Time Intervention



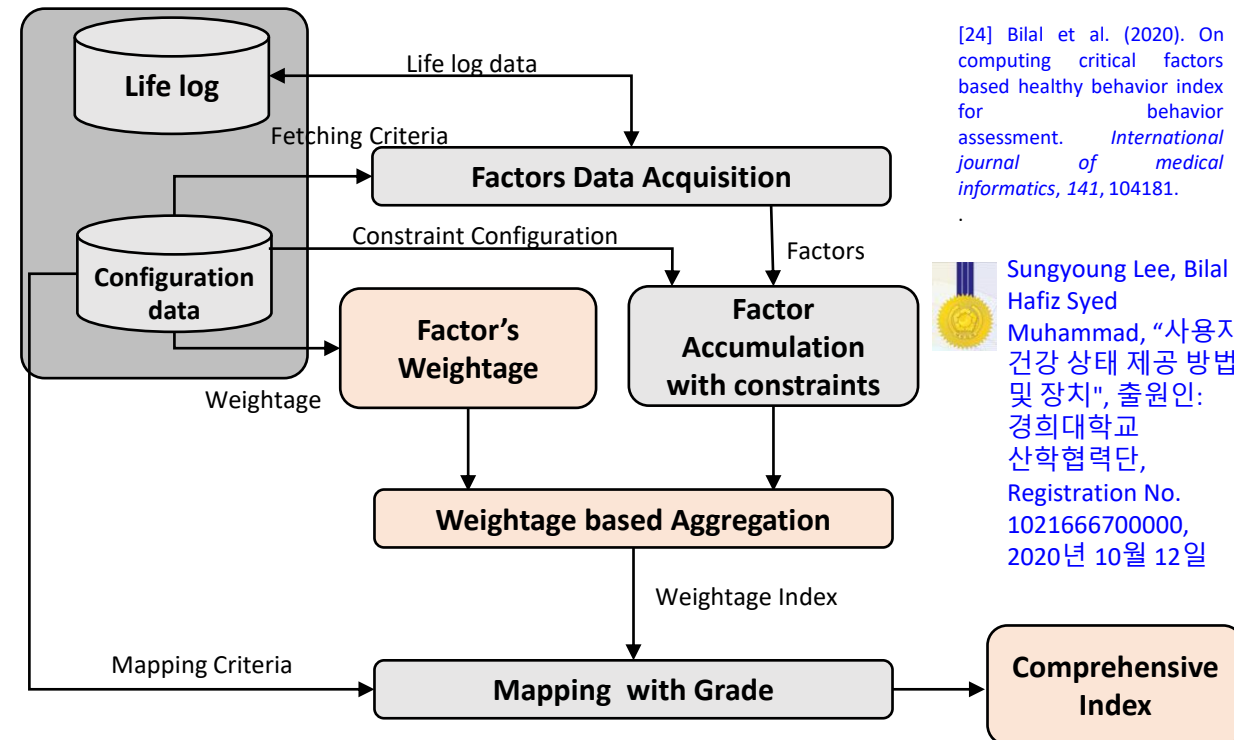
Solution 1: Index Generation Comparison

Existing approach for Factor Grading



[18] Dunn et al. (2019)

Proposed approach of Index Generation



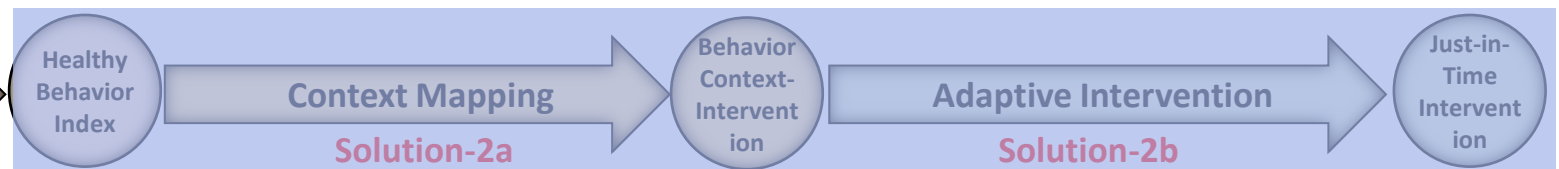
[24] Bilal et al. (2020). On computing critical factors based healthy behavior index for behavior assessment. *International journal of medical informatics*, 141, 104181.

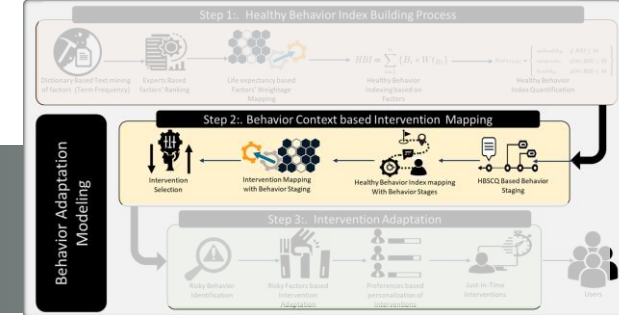
 Sungyoung Lee, Bilal Hafiz Syed Muhammad, "사용자 건강 상태 제공 방법 및 장치", 출원인: 경희대학교 산학협력단, Registration No. 1021666700000, 2020년 10월 12일



Index Generation

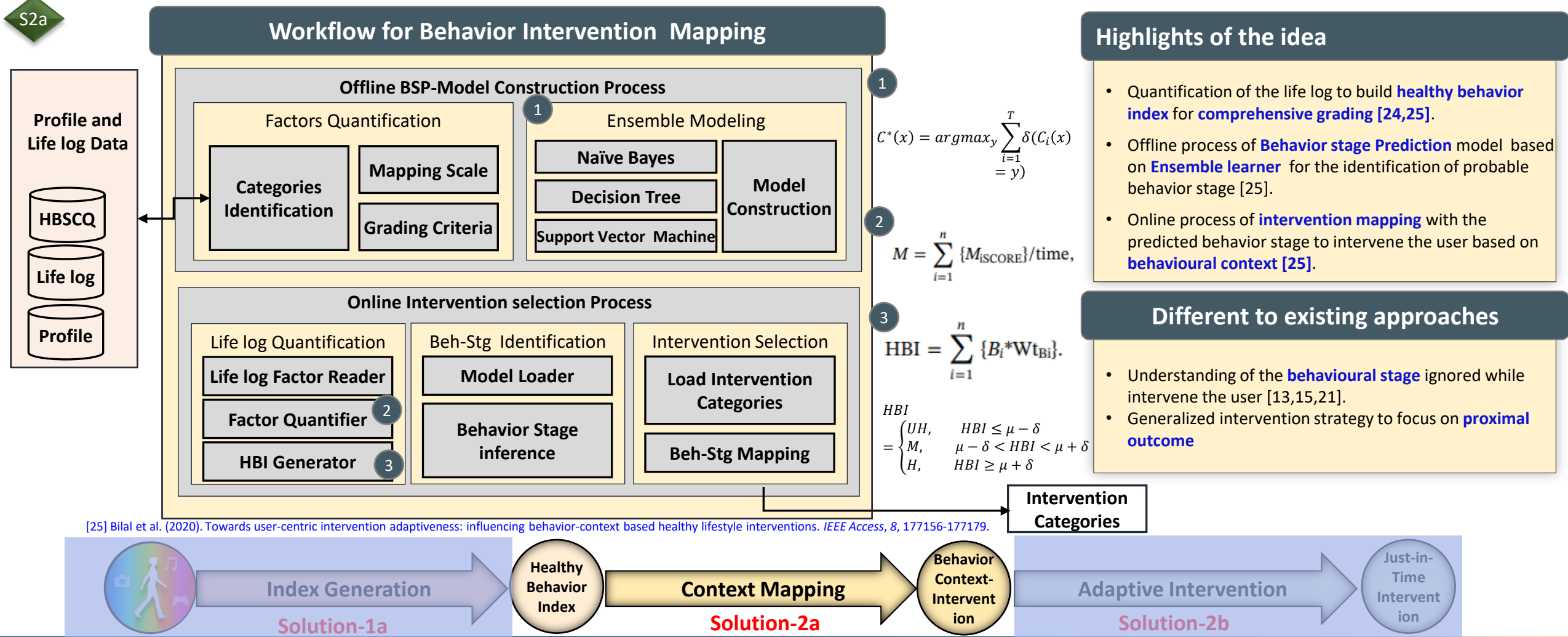
Solution-1a



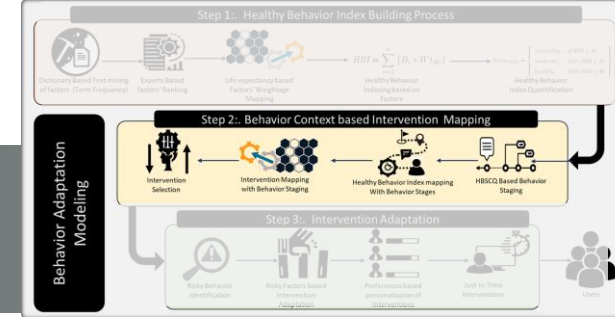


Solution 2a: Behavior Intervention Mapping

S2a

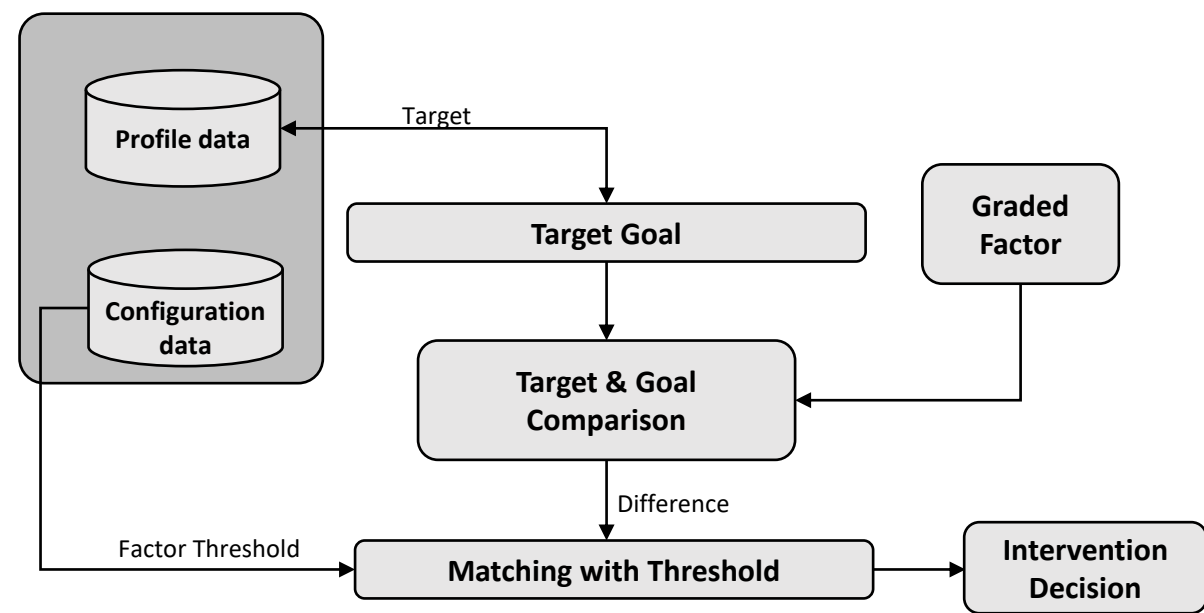


[25] Bilal et al. (2020). Towards user-centric intervention adaptiveness: influencing behavior-context based healthy lifestyle interventions. *IEEE Access*, 8, 177156-177179.



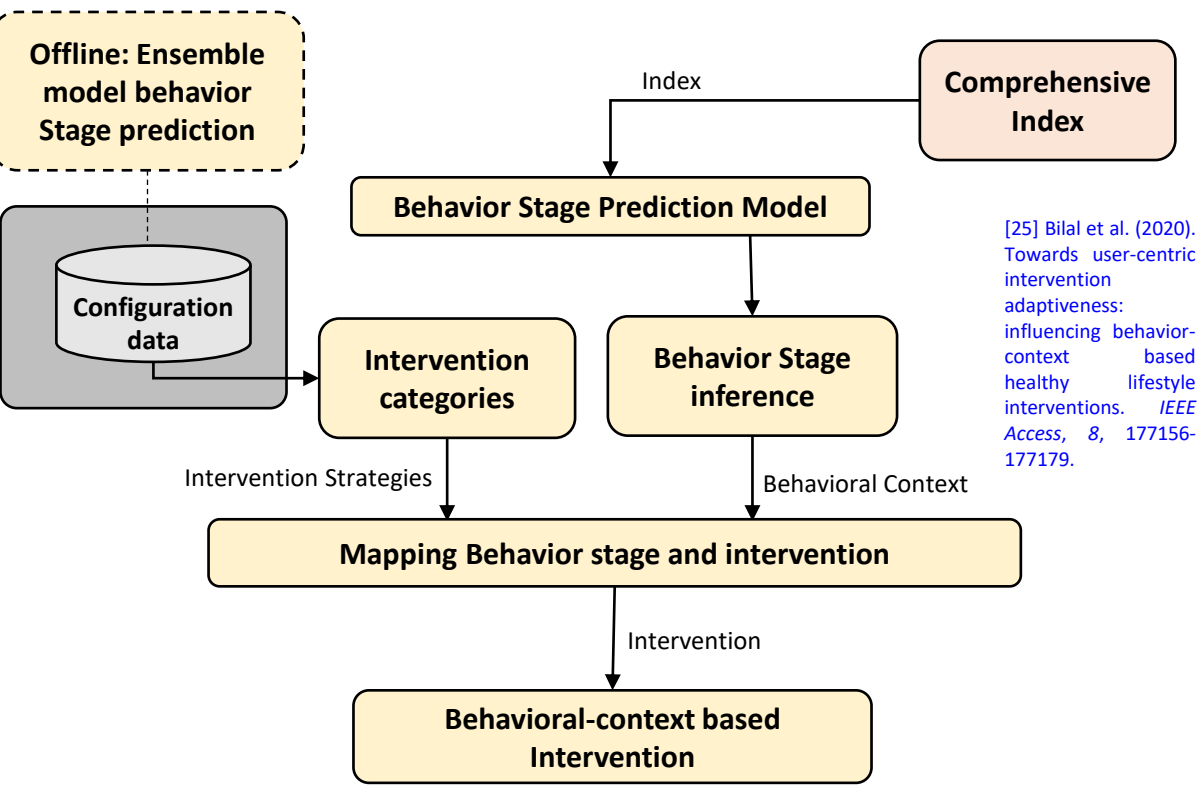
Solution 2a: Behavior Intervention Mapping Comparison

Existing Approach of Intervention Decision



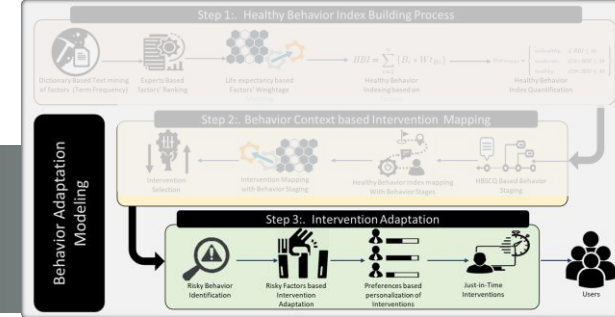
[13] Gonzalez-Sanchez et al. (2019)

Proposed Approach of Behavior Intervention Mapping

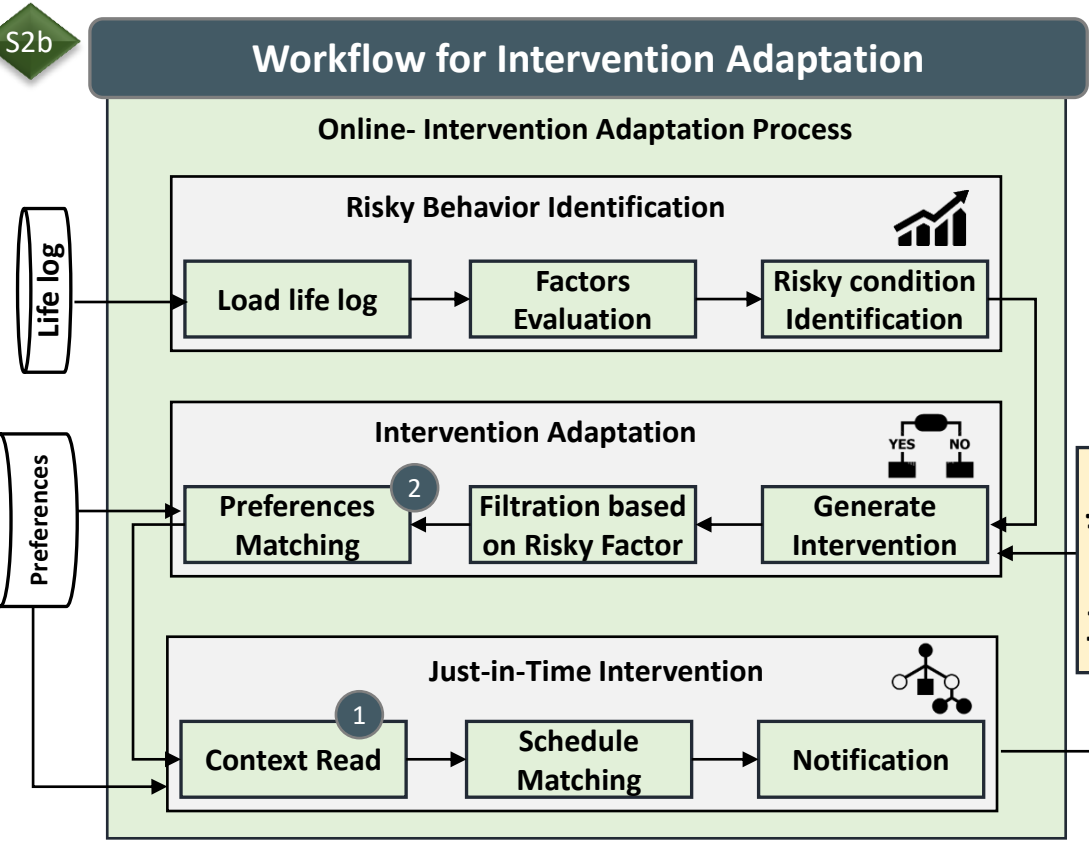


[25] Bilal et al. (2020). Towards user-centric intervention adaptiveness: influencing behavior-context based healthy lifestyle interventions. *IEEE Access*, 8, 177156-177179.





Solution 2b: Intervention Adaptation



$$M_{e_n} = \left\{ sortedlist \sum_{L_T=1}^{L_T=n} \sum_{S_T=1}^{S_T=m} \{e_n \geq T_e\} \right\}$$

$$A_{e_n} = \{ \{ \sum_{T_1}^{T_n} t.e_n \} > T_{Threshold} \}$$

$$Rec_{fi} = I_{Rec} \cap P_{fi}$$

Highlights of the idea

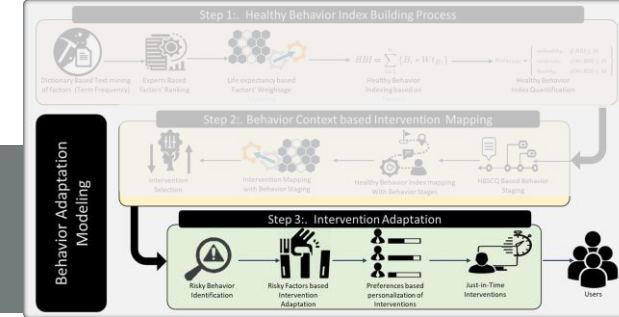
- Analysis of **factors** and **sub factors** to identify the **risky condition** to emphasis in the intervention[24].
- **Adaptation** of the intervention based on the **risky factors** as well as **user preferences** under the constraint of recommendations [25].
- Trigger the notification process based on **the intervention category** and **behavioural-context** of the user [5,22,25].

Different to existing approaches

- Existing methodology intervene on once in **daily**, or **weekly** [15].
- Behavioral **stage and context** is not considered while intervene the user[13].
- Under utilization of **feedback** for the **refinement** and assessment of **receptivity** for the further intervention generation [18].

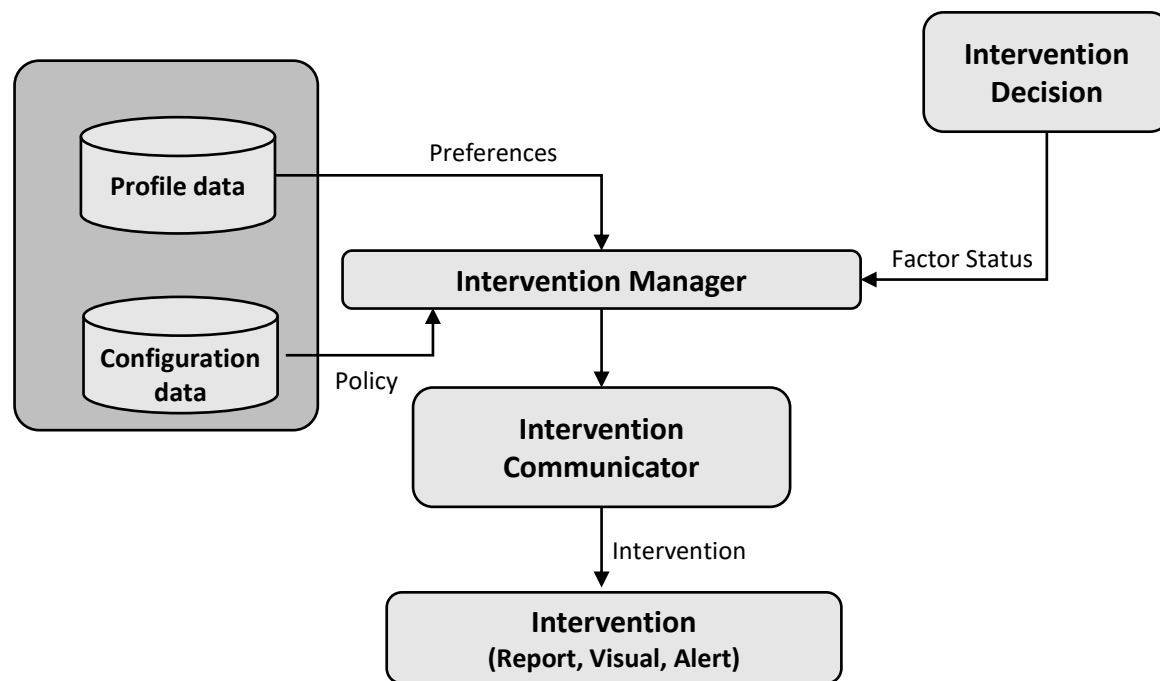
[25] Bilal et al. (2020). Towards user-centric intervention adaptiveness: influencing behavior-context based healthy lifestyle interventions. *IEEE Access*, 8, 177156-177179.





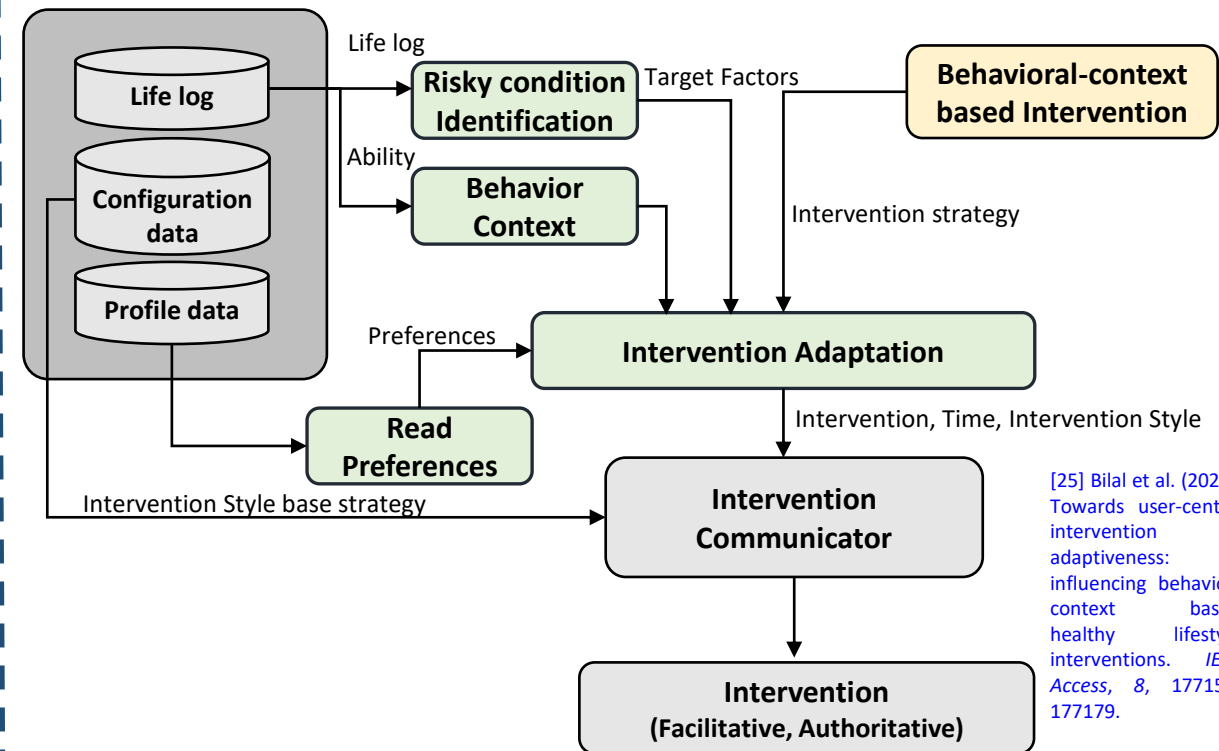
Solution 2b: Intervention Adaptation Comparison

Existing Approach for Intervention Generation

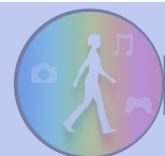


[15] Brindal et al. (2019)

Proposed Approach of Intervention Adaptation



[25] Bilal et al. (2020). Towards user-centric intervention adaptiveness: influencing behavior-context based healthy lifestyle interventions. *IEEE Access*, 8, 177156-177179.



Index Generation

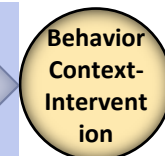
Solution-1a



Healthy Behavior Index

Context Mapping

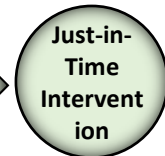
Solution-2a



Behavior Context-Intervention

Adaptive Intervention

Solution-2b



Just-in-Time Intervention

Comparative Analysis

	Goal Oriented	Self Monitoring	Behavior Adaptation	Behavior Education	Behavior Formation & Analysis	Alert	Focus Factors	Behavioral Feedback	Recommendation & Remarks
[13] Gonzalez-Sanchez et al.(2019)	User Based	✓	✗	✗	✗	✗	Dietary habits, Physical activity	✓	End of day Report along with full day recommendation
[14] Arrogi et al. (2019)	✗	✓	✗	✓	✗	✓	Sedentary Behavior	✓	No recommendation, visualization of prolonged sitting
[15] Brindal et al. (2019)	✗	✓	✗	✓	✗	✓	Diet and Physical Activity	✓	Feedback driven recommendation on entry data.
[18] Dunn et al. (2019)	✗	✓	✗	✓	✗	✗	Dietary Habits	✗	Generic podcasts for recommendation twice weekly
[16] Baskerville et al. (2018)	User Based	✓	✗	✓	✗	✗	Smoking cessation	✓	Graphical and tabular report to highlight the status of smoking
[17] Crane et al. (2018)	✗	✓	✗	✓	✗	✓	Alcohol Consumption	✓	Daily progress and mission indicator
[21] Kliemann et al. (2019)	User Based	✓	✗	✓	✗	✓	Dietary Habits	✓	Promote self-regulatory eating skills through goal diary
Proposed	Expert Based	✓	✓	✓	✓	✓	Diet, Physical activity, Smoking, Alcohol	✓	Personalized context based just-in-time recommendation

Experiment 1- Solution1: Healthy Behavior Index as Service

Demographics

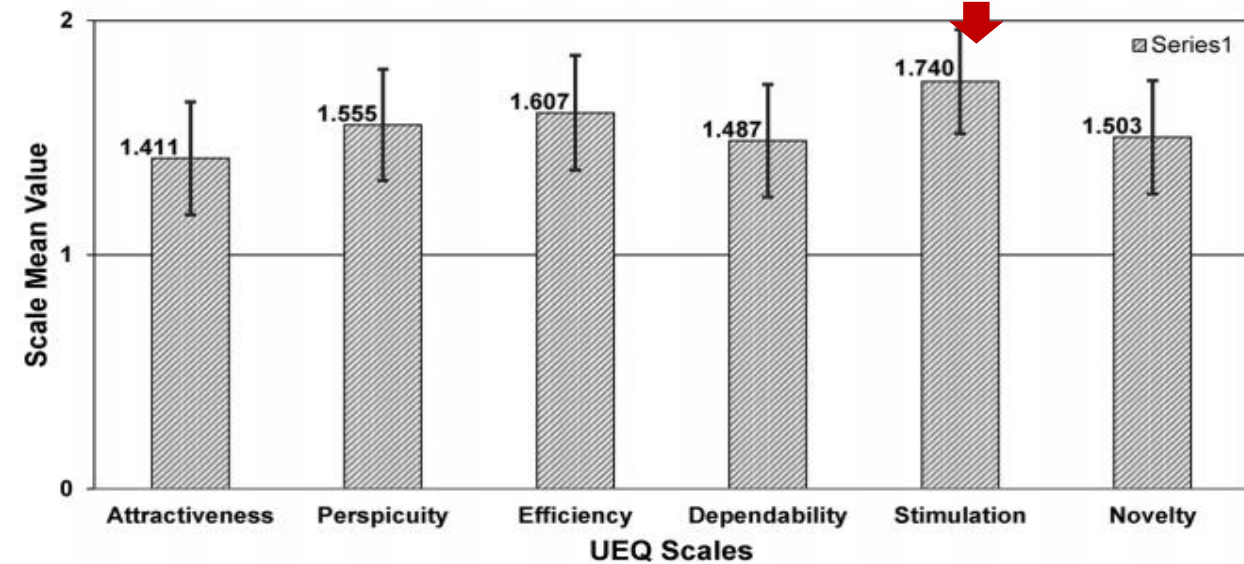
	No. of users	% of users
Age (year)		
35-40	25	24.27%
41-50	52	50.48%
50 and above	26	25.24%
Gender		
Male	65	63.10%
Female	38	36.89%
Health issues		
Obesity	33	37.86%
Hyperlipidemia	25	24.27%
Hypertension	21	20.39%
Diabetes	24	20.30%
Course completion		
Complete	99	96.12%
left	4	3.89%
Smart devices expertise		
Expert	20	19.42%
Intermediate	76	73.79%
Novice	7	6.80%

Analysis

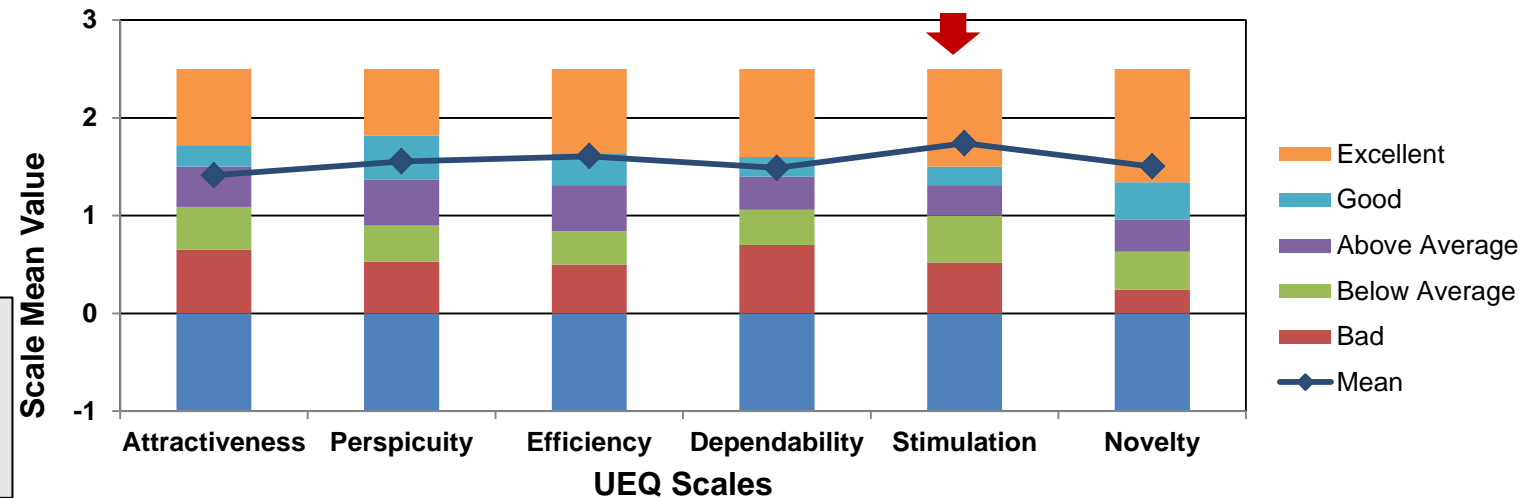
User Experience Questionnaire (UEQ)

- Benchmark **163** studies and 4818 participants dataset
- Stimulation with Confidence interval : **0.222(1.740 to 1.962)**
- Grade: **Excellent (average >1.5)**

UEQ Scales Assessment Chart for HBI Service



HBI Service Benchmark Analysis



[24] Bilal et al. (2020). On computing critical factors based healthy behavior index for behavior assessment. *International journal of medical informatics*, 141, 104181.

Experiment-2: Solution2 Impact of adaptive Intervention

Scenario #	Physical Activity	Smoking	Alcohol	Diet
S1	Unhealthy	Unhealthy	Unhealthy	Unhealthy
S2	Normal	Normal	Normal	Unhealthy
S3	Unhealthy	Normal	Unhealthy	Normal
S4	Normal	Healthy	Healthy	Normal

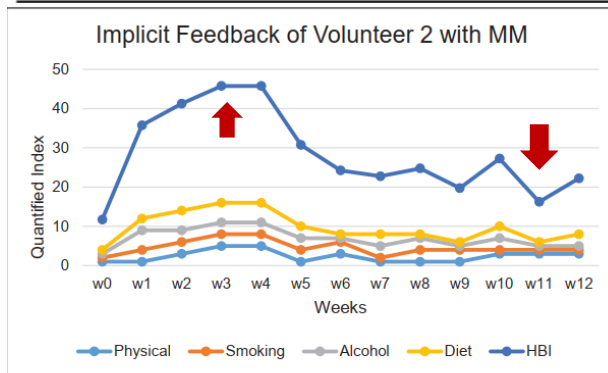
Analysis

Existing Approaches:

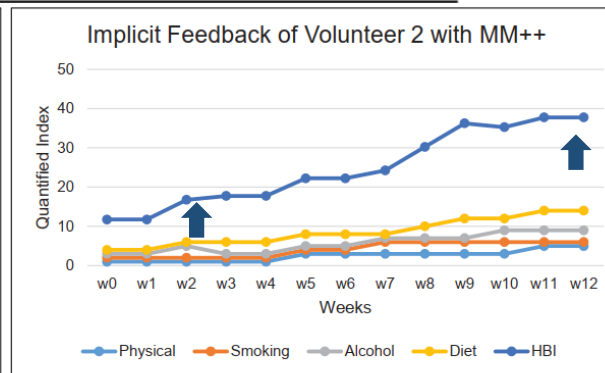
- HBI exponentially increase for first 4 weeks and then decline towards initial stage

Proposed Approach:

- HBI improves continuously with slow phase



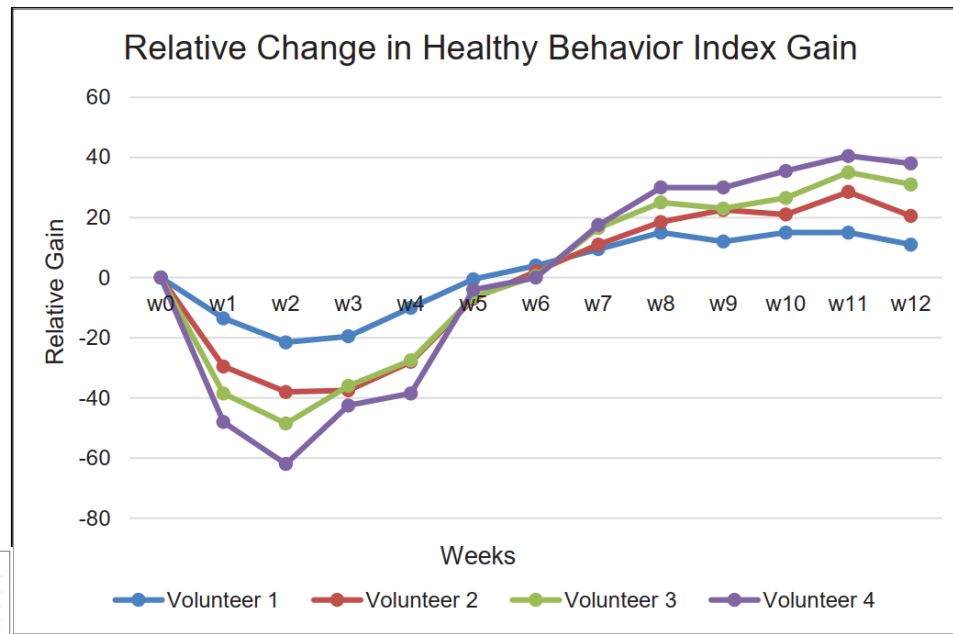
(b)



(b')

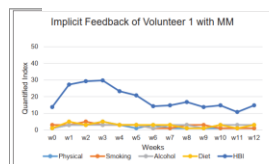


Change in Gain

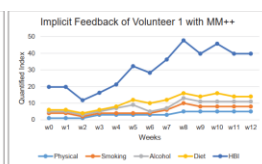


Volunteer 2:

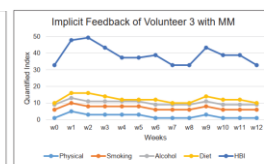
Physical activity status: Sedentary; Smoking status: Unhealthy;
Alcohol consumption: Unhealthy; Diet status: Unhealthy



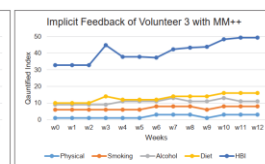
(a)



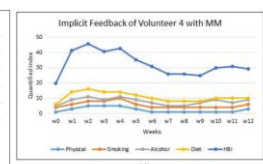
(a')



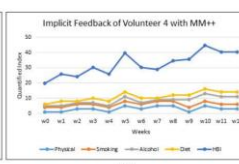
(c)



(c')



(d)



(d')

Volunteer 3:

Physical activity status: Normal; Smoking status: Normal;
Alcohol consumption: Unhealthy; Diet status: Unhealthy

Volunteer 4:

Physical activity status: Sedentary; Smoking status: Healthy;
Alcohol consumption: Normal; Diet status: Unhealthy

[25] Bilal et al. (2020). Towards user-centric intervention adaptiveness: influencing behavior-context based healthy lifestyle interventions. *IEEE Access*, 8, 177156-177179.

Conclusion

Thesis Contributions

- Comprehensive multidimensional **Healthy Behavior Index**
 - Critical lifestyle adaptable factors identification
 - Factors identification using text mining
 - **Rank factors** using Cohen's Kappa Inter-rater agreement
 - Healthy Behavior Index (HBI) generation
 - **Weightage identification** through life expectancy
 - Combinatorial **HBI average for Behavior categorization**.
 - **UEQ benchmark** ranked **Stimulation** as **Excellent**
- Personalized coalesced model for **adaptive intervention**
 - Ensemble model for mapping **Transtheoretical stages**
 - **Risk factors and profile preferences based interventions**
 - eSURVEY portfolio marked as **Desired**

Uniqueness

- **Lifestyle** critical factors **ranking** for **weightage index**
- **Behavioral-context** mapping for **intervention selection**
- Personalized adaptive intervention for **distal outcomes**

Publications

Published papers

- **SCIE Journals (12)**
 - First Author: 2 Published
 - Co-author: 10 Published
- **Local Journals (4)**
 - Co-Author: 4 Published
- **Conferences (23)**
 - First Author: International: 10
 - Co-Author: International: 8
 - First Author Local Conferences: 5
- **Domestic Patents (06)**
 - Applied Local: 4
 - Applied International :1
 - Registered Local: 1



Publication



Papers in progress

- SCIE Journal (01)
 - ♦ Bilal et. al...
- Patent to be applied (01)

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Thank you for your attention!

Q & A?