Introduction

Prevention of obesity and overweight are nowadays a major challenge worldwide. They are associated with the metabolic syndrome and diabetes (type 2). Health promotion tries to affect on attitudes and health behaviors and health communication is a key strategy to inform people about health concerns. Tailoring is a method pursuing to improve the effectiveness of communication and delivery of information at the individual level to increase its relevance and also personal involvement.

According to Rimer and Kreuter (2006, p. 184) “tailored health communication is any combination of information and behavior change strategies intended to reach one specific person based on information unique to that person, related to the outcomes of interest, and derived from an individual assessment”. Already by the turn of the millennium researchers were convinced that in most cases tailored health communication can be more effective than traditional promotion (e.g., Brug et al. 2003, Kreuter et al. 2000, Neuhauser & Kreps 2003, Skinner et al. 1999). Many studies have concluded that tailored information is more satisfying, more interesting and more personally relevant, read more deeply and is more often discussed with others than general health information (e.g., Brug et al. 2003, Kreuter & Wray 2003, Oenema et al. 2005, Skinner et al. 1999).

As tailoring is based on characteristics of a person derived from an individual assessment, the characteristics are chosen based on those considered important in change in specific health behavior. These characteristics can vary from socio-demographic to for example health information literacy levels. The effectiveness of tailoring is often studied in health behavior change interventions.

Change in behavior is a complex phenomenon. The theoretical basis of tailored communications derives from social psychology as well as communication and persuasion theories and models (Campbell & Quintiliani 2006). In tailored health
communication, a tailored message is a delivery means for presenting a persuasive appeal. The beliefs that are aimed at by a tailored approach can come, for example, from behavior change theories. Information processing theories which focus on the different stages of the persuasion process and which consider the importance of message content for different audiences may help explain the effectiveness of tailoring. (Cappella 2006.) Studies of tailored health interventions are usually very interdisciplinary and this subject has not been under a lot of research in the field of Information Studies. For example theories, models and concepts of information behavior might give some new aspects to consider in the tailoring process and in comprehension of the effects of tailoring.

**Subject of my doctoral thesis**

My study is a subproject of the “Health Information Practice and its Impact. The context of metabolic syndrome and obesity” -project which is funded by the Academy of Finland and conducted together with the Information Studies, University of Oulu and Åbo Akademi University. The focus of my thesis research is tailoring of health information in the context of metabolic syndrome, diabetes (type 2) and obesity. 23 tailored health intervention studies were reviewed in our first article (Enwald & Huotari 2010). I will be studying what kind of differences can be found in information behavior of persons at risk for type 2 diabetes and how the tailored messages should be presented to them. The problems and barriers in understanding health information are also investigated.

**References**


