



National Obesity Care Week Obesity Communication Topics & Resources

October 5, 2015

Overview

Because of its complexity, communicating about obesity can be challenging. To help improve the impact of your efforts, we've put together the following communications recommendations. For example, tying obesity to a trend and/or tailoring your communications to a specific audience, can help generate more awareness and broaden the reach of your message. In other words, you can reach the congregation and not just the choir!

Your organization is unique and has a unique voice to contribute to the conversation. In addition to using and modifying the toolkit resources, we encourage you to develop unique content that is authentic to your organization's interest and expertise.

For example:

- Produce a video with a leader from your organization for distribution via your website or social channels
- By-line a news article; feature article or op-ed to post on your website, blog or newsletter; or pitch to your trade or local media
- Leverage your social platforms (e.g., Facebook, Instagram, LinkedIn, Twitter) to highlight statistics, trends and news stories at the intersection of obesity and your audience
- Develop and promote an infographic on a popular trend in your specialty and obesity
- Proactive pitch your regular trade publications or local media

Be sure to share it with us on Twitter at @ObesityCareWeek and hashtag #ObesityCareWeek. We will promote it via our channels as well.

Obesity Communication Topics & Resources

Below are some topics and resources that may resonate with you. The list is endless. We hope the following topics, foundational messages and links to supporting information provide useful materials that you can use to create unique content relevant for your audiences/membership.

- **The role of the entire care team in improving obesity care**
Obesity is a complex multifactorial disease – multiple factors interact to cause the disease. These factors include physiological, psychological, environmental, as well as genetic factors.^{1,2} All health professionals, including nurses, nurse practitioners, pharmacists and physician assistants, are uniquely positioned to help support and, in many instances, coordinate the multidisciplinary healthcare team to care for each individual affected by obesity.

SUPPORTING RESOURCES

- Why Weight: A Guide to Discussing Obesity & Health with Your Patients
 - www.stopobesityalliance.org/wp-content/themes/stopobesityalliance/pdfs/STOP-Provider-Discussion-Tool.pdf

¹ Kushner R, Lawrence V, Kumar S. Practical Manual of Clinical Obesity. 1st ed. West Sussex, UK: John Wiley & Sons, Ltd; 2013.

² Tompson T, Benz J, Agiesta J, et al. Obesity in the United States: public perceptions. The Associated Press-NORC Center for Public Affairs Research. 2013. <http://www.apnorc.org/PDFs/Obesity/AP-NORC-Obesity-Research-Highlights.pdf>. Accessed July 25, 2014.



- Identification of educational needs in the management of overweight and obesity: results of an international survey of attitudes and practice
 - www.ncbi.nlm.nih.gov/pubmed/26238414

- **The need for medical education to teach obesity care**

Unfortunately, significant bias exists against people affected by obesity, which is shared by many healthcare professionals. Therefore, improving medical education has the potential to shift attitudes and drive progress in the treatment of obesity. Furthermore, many still believe that a major reduction in weight is required to experience benefits, despite data that suggest that weight loss of 5 to 10 percent improves obesity-related comorbidities, including hypertension, cardiovascular disease, hyperlipidemia, type 2 diabetes and sleep apnea.^{3,4}

SUPPORTING RESOURCES

- Obesity, Bias, and Stigmatization
 - www.obesity.org/resources-for/obesity-bias-and-stigmatization.htm
- The Need for Better Obesity Education—In Medical Schools
 - <http://healthland.time.com/2013/10/10/the-need-for-better-obesity-education-in-medical-schools/>
- Weight Bias and Discrimination: A Challenge for Healthcare Providers
By Melinda J. Watman, BSN, MSN, CNM, MBA
 - <http://www.obesityaction.org/wp-content/uploads/weight-bias-and-healthcare-providers.pdf>
- Benefits of 5-10 Percent Weight-loss
 - www.obesityaction.org/wp-content/uploads/Benefits-of-5-10-Percent-Weight-loss.pdf

- **Obesity through an ethnic lens**

While obesity prevalence has increased across all ethnic groups in the U.S. over the last decade, there are substantially higher rates in African American and Latino populations.⁵ The reasons for these differences are complex and not yet fully understood, but they're likely to include differences in behavioral and cultural norms, as well as environmental factors.

SUPPORTING RESOURCES

- The State of Obesity: Adult Obesity Rates
 - www.stateofobesity.org/disparities
- CDC: Differences in Prevalence of Obesity Among Black, White, and Hispanic Adults
 - www.cdc.gov/mmwr/preview/mmwrhtml/mm5827a2.htm

- **The role of technology in supporting weight management strategies**

Increasingly, patients are using technological advances – from supportive e-health programs to activity trackers (e.g. Fitbits and Jawbone devices) – to keep them motivated and engaged. How can healthcare professionals leverage this trend to help care for patients?

SUPPORTING RESOURCES

- Digital Health Technology for Weight Loss and Weight Maintenance

³ Weight-control Information Network. Understanding adult obesity. US Department of Health and Human Services, National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases. NIH Publication No. 06-3680. November 2008. Available at: <http://win.niddk.nih.gov/publications/understanding.htm>. Accessed on March 4, 2014.

⁴ Wing R, Lang W, Wadden T, et al. Benefits of modest weight loss in improving cardiovascular risk factors in overweight and obese individuals with type 2 diabetes. *Diabetes Care*. 2011;(34):7.

⁵ Wang Y, Beydoun M. The Obesity Epidemic in the United States Gender, Age, Socioeconomic, Racial/Ethnic, and Geographic Characteristics: A Systematic Review and Meta-Regression Analysis. *Epidemiologic Reviews*. 2007;29(1):6-28. doi:10.1093/epirev/mxm007.



- www.obesity.org/resources-for/digital-health-technology-for-weight-loss-and-weight-maintenance.htm

- **Big data and obesity**

Big data has the potential to improve our understanding of obesity as a disease, driving improvements in decision-making around accelerating new treatments.

SUPPORTING RESOURCES

- An Integrated Framework For The Prevention And Treatment Of Obesity And Its Related Chronic Diseases
 - <http://content.healthaffairs.org/content/34/9/1456.abstract>

- **Beyond BMI (Body Mass Index)**

While BMI can serve as a useful indicator in obesity management, it is by no means a definitive measure. It's important that other measures, such as measures of body mass versus body fat, also be taken into account when assessing the disease.

SUPPORTING RESOURCES

- AACE: Time to look beyond BMI
 - www.medpagetoday.com/MeetingCoverage/AACE/45854

- **Regaining weight that is lost**

It is widely understood that weight loss in people with obesity causes changes in appetite, so the body adjusts by burning fewer calories (energy-saving mode) and reducing energy expenditure. This adaptation makes it hard to keep weight off.^{6,7}

SUPPORTING RESOURCES

- The Lancet: Treating obesity seriously: when recommendations for lifestyle change confront biological adaptations
 - [http://www.thelancet.com/journals/landia/article/PIIS2213-8587\(15\)00009-1/abstract](http://www.thelancet.com/journals/landia/article/PIIS2213-8587(15)00009-1/abstract)
 - Article on Lancet Study: Diet and exercise alone are no cure for obesity, experts say
 - <http://www.latimes.com/science/sciencenow/la-sci-sn-eat-less-more-obesity-20150212-story.html>
- Why Is It So Easy to Regain Weight?
 - <http://weightology.net/weightologyweekly/index.php/free-content/free-content/volume-1-issue-9-why-is-it-so-easy-to-regain-weight/why-is-it-so-easy-to-regain-weight>

⁶ Sumithran P, Prendergast LA, Delbridge E, et al. Long-term persistence of hormonal adaptations to weight loss. *NEJM*. 2011;365(17):1597-1604.

⁷ Schwartz A, Doucet É. Relative changes in resting energy expenditure during weight loss: a systematic review. *Obes Rev*. 2010;11(7):531-547.