

Introduction/Background/Significance

- Nearly one-third of the US adults and 17% of US children, today are obese (Ogden, Carroll, Fryar, & Flegal, 2014).
- 34.9% or 78.6 million of the US adult population affected by chronic illnesses and other disease process associated with obesity (Center for Disease Control and Prevention (CDC), 2015).
- Medical Costs estimated at \$209.7 billion, i.e. 20% of all US healthcare costs per year (Spieker & Pyzocha, 2016).
- Evidence indicate 43% of adults are trying to lose weight and another 23% struggling to maintain their weight (Pasarica & Topping, 2017).
- Limited provider-directed obesity treatment.
- Barriers to Care - providers' lack of knowledge, skills, and confidence (Pasarica & Topping, 2017; Stanford, Johnson, Claridy, Earle, & Kaplan, 2015).
- Providers fail to use available evidence-based guidelines and recommendations

Clinical Question

Does a 4-week educational activity influence provider knowledge and confidence in decision making and intent to use the information gained when assessing and treating patients with obesity in a primary care setting?

Nursing and Healthcare Implications

- Increase provider confidence and knowledge to improve patient care.
- Addressing the source - maximizing effective obesity management in primary care.
 - Prevent Obesity and reduce chronic illness
 - Prevention of complications
 - Increase patient involvement
 - Increase behavioral changes
 - Increase Self efficacy
 - Continued evaluation of practice
 - Ongoing education on modalities of treatments
 - Update with arising new research

References:

Center for Disease Control and Prevention. (2015) *Division of Nutrition, Physical Activity, and Obesity*. Retrieved from Center for Disease Control and Prevention: <http://www.cdc.gov/obesity/data/adult.html>

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Ogden, C., Carroll, M., Fryar, C., & Flegal, K., (2015) Prevalence of obesity among adults and youth: the United States, 2011–2014. *NCHS Data Brief*, (219) 1-8

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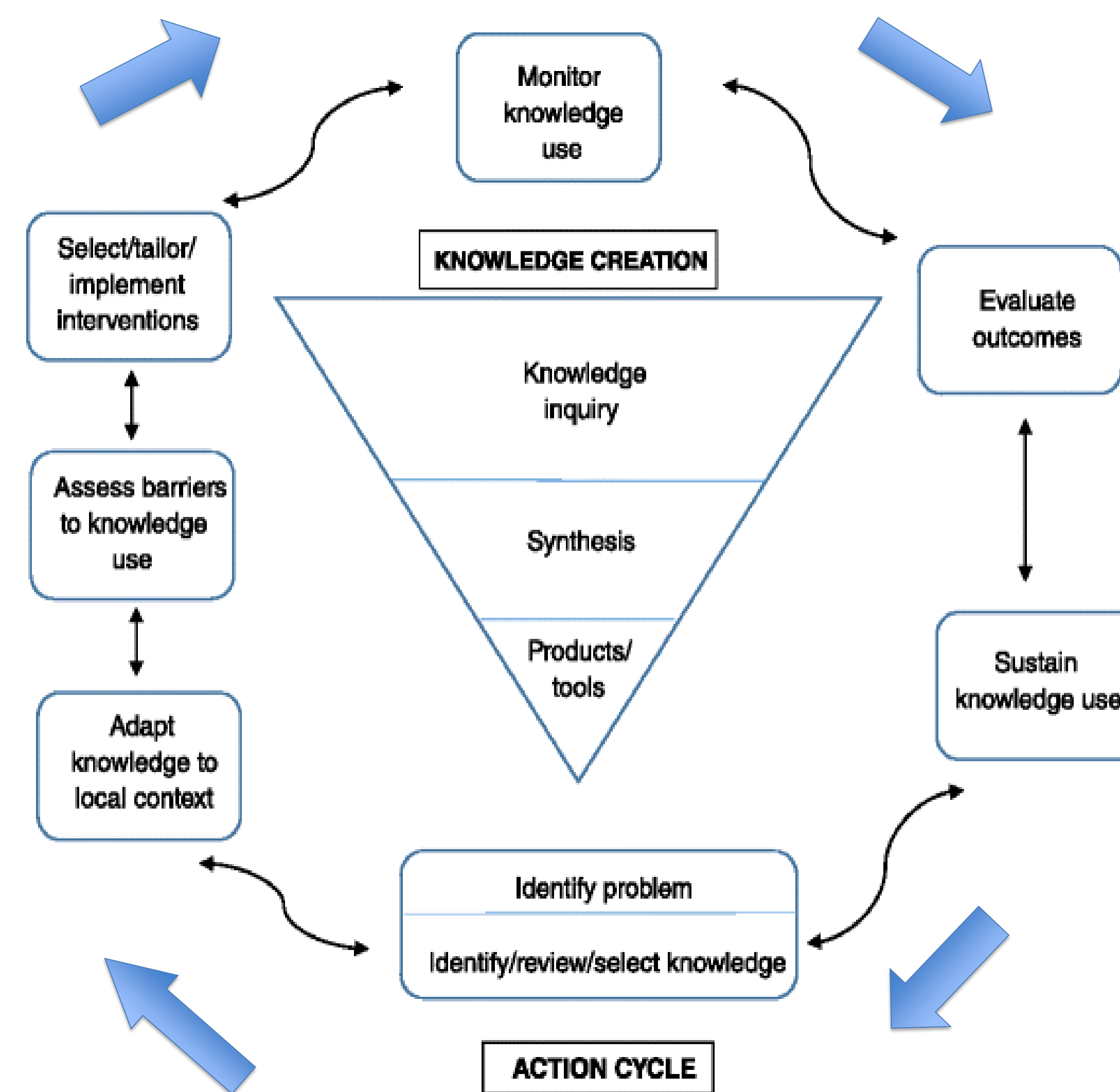
Pasarica, M., & Topping, D. (2017). An Evidence-Based approach to teaching obesity management to medical students. *MedEdPORTAL: The Journal of Teaching and Learning Resources*, 13, 10662. doi:10.15766/mep_2374-8265.10662

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Methodology

- Purposeful sample of men and women randomly selected for duration of the four weeks n=20
- Pre-Survey - demonstrate current knowledge, thoughts, beliefs, and attitudes
- Following the survey, a 4-week educational program on
 - Current information
 - Modified tools
 - Communicate effectively
- Post Survey- at the end of the 4-week educational period to evaluate increase in knowledge and confidence

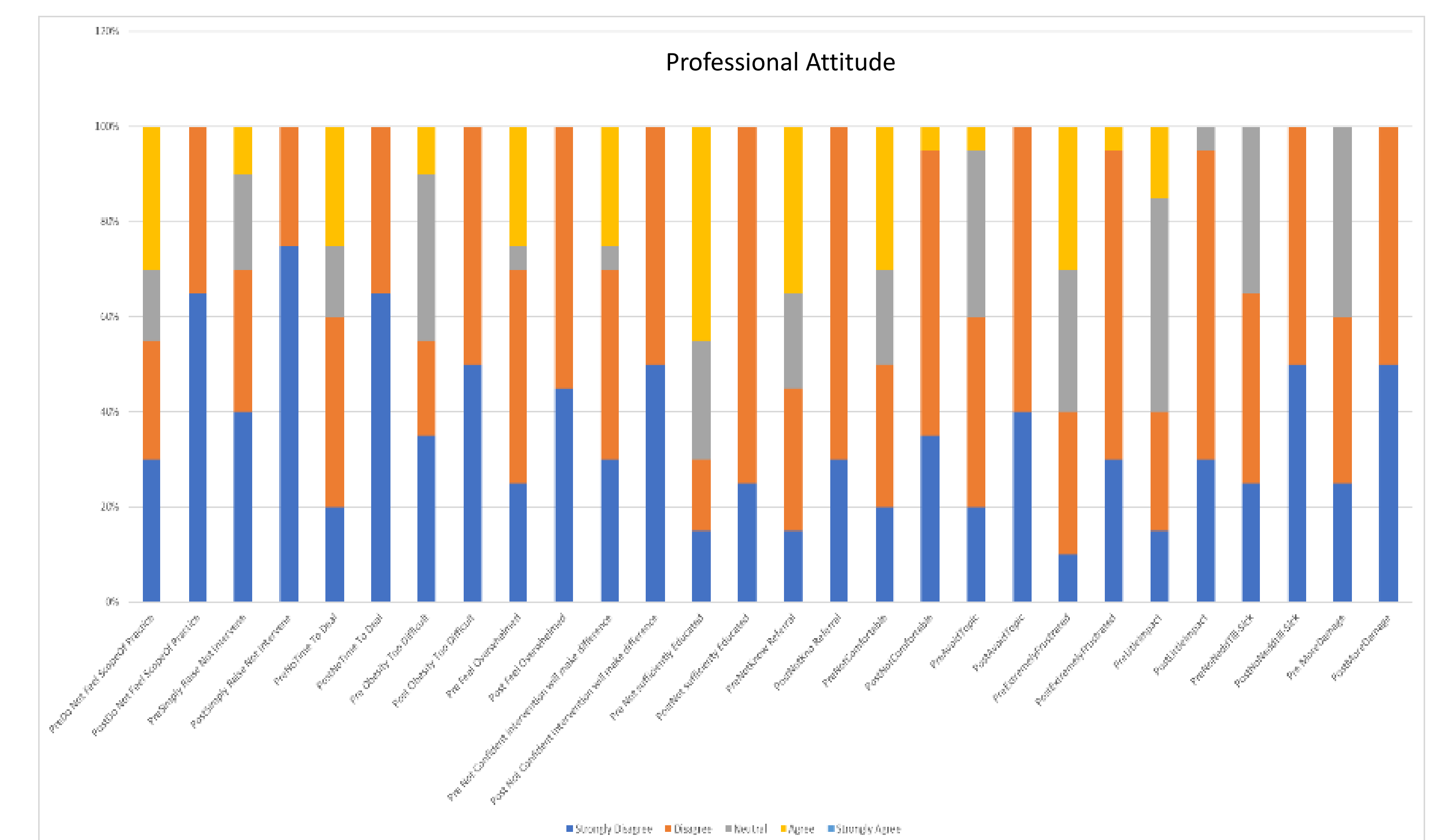
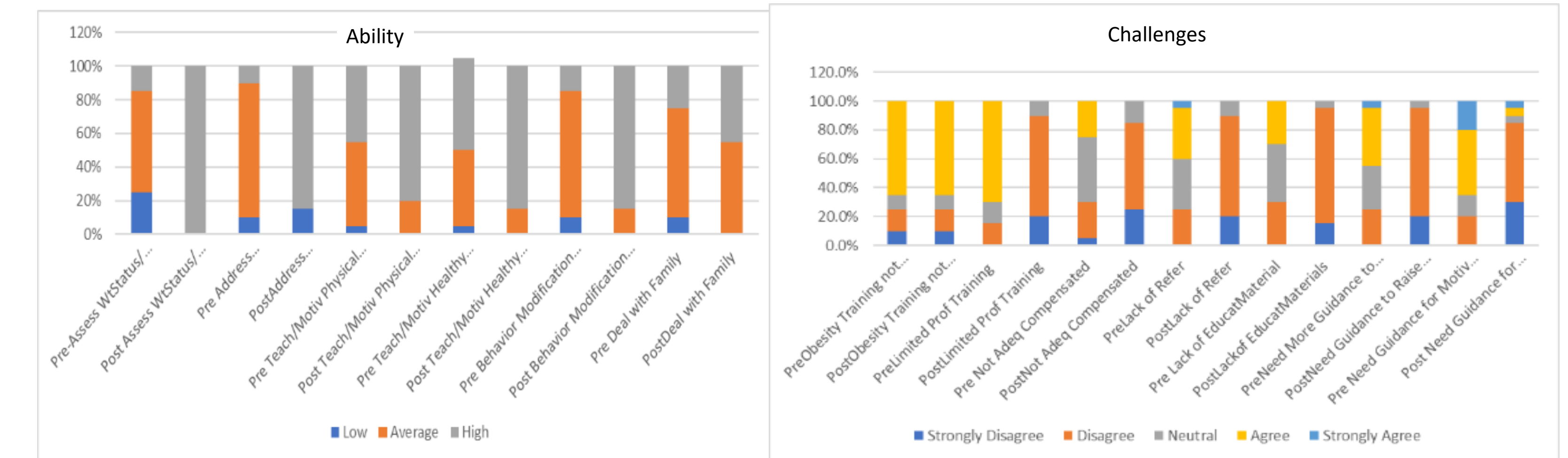


Knowledge to action process. Reprinted from Graham, I. D., Logan, J., Harrison, M. B., Straus, S. E., Tetroe, J., Caswell, W., & Robinson, N. (2006). Lost in knowledge translation: Time for a map? *Journal of Continuing Education in the Health Professions*, 26(1), 13-24. doi:10.1002/chp.47

Conclusion

The results of this study showed improvement in professional skills and attitudes of healthcare providers who participated in the learning activity. Additionally, providers realized less challenges after the activity. The positive results from the learning activity support the training needs identified by healthcare practitioners in previous studies. The results further suggest continued use of this design and content to model future educational training in the care of obese people.

Results



Discussion

The study helped:

- identify topics related to obesity management and learning
 - increase the quality of weight management
 - increase quality of life of the patients.
 - participants self-report to change practice
- Limitations
- can be generalized to other similar populations.
 - knowledge gaps similar to the findings of other studies.
 - future studies will need to consider how learning may need to be modified for different settings.