



FRONTIER NURSING  
UNIVERSITY®



October 1-7, 2017

**MISSION FOCUSED:**



# Nurse-Midwives Answering the Call

A Virtual Event in Celebration of  
National Midwifery Week





# Conversations on Weight

- Be aware of weight bias
- Be patient-centered and patient specific
- Encourage lifestyle change, not weight loss

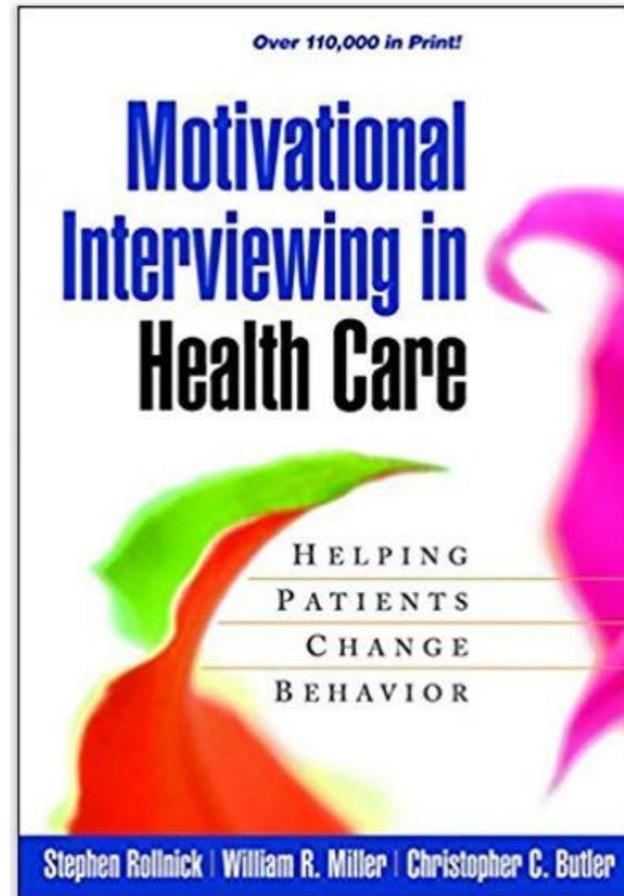


# Conversations on Weight

## Motivational Interviewing (MI)

- William Miller, PhD introduced motivational interviewing in 1983.
- Motivational Interviewing: Helping People Change*, written with Stephen Rollnick, first published in 1991

MI is endorsed by many professional organizations as the preferred way to discuss behavior change



Rollnick, Miller, & Butler, 2008



# Motivational Interviewing

R

- Resist correcting patients

U

- Understand

L

- Listen

E

- Empower



# Motivational Interviewing



**WHY WEIGHT?**  
A Guide to Discussing  
Obesity & Health  
With Your Patients

**STOP**  
STRATEGIES TO  
OVERCOME & PREVENT  
**OBESITY**  
ALLIANCE

## Communication Strategies to Promote Active Listening

- *"What things would change if you accomplished your weight loss goals?"*
- *"I'd like to learn more about your eating and physical activity habits. What types of activities do you enjoy? What types of foods do you typically eat?"*
- *"What changes to your eating and physical activity habits do you think you could reasonably make?"*
- *"Let's work together to create a plan that will work best for you."*
- *"May I offer you suggestions based on what you've told me?"*
- *"I appreciate your willingness to discuss these issues with me."*

Strategies to Overcome and  
Prevent Obesity Alliance, 2017



# Motivational Interviewing

← → ↻ | biastoolkit.uconnruddcenter.org

8 MODULES TOOLKITS FOR HEALTH CARE PROVIDERS

**Weight Bias Homepage**

Preventing Weight Bias: Helping without Harming in Clinical Practice

MODULE 1  
Increasing Self-Awareness of Weight Bias

MODULE 2  
Improving Provider-Patient Interactions

MODULE 3  
Overview of Weight Bias in Health Care Settings

MODULE 4  
Office Environment Strategies to Reduce Weight Bias

MODULE 5  
Weight Bias Resources for OB/GYN Providers

MODULE 6  
Weight Bias Resources for Pediatricians

MODULE 7

## PREVENTING WEIGHT BIAS

HELPING WITHOUT HARMING IN CLINICAL PRACTICE

**If you learned a certain group of patients was facing disparities in health care, would you advocate for them?**

**If you discovered a barrier that was preventing your patients from getting recommended screenings, and it was within your power to knock down that barrier – would you?**

**If you found a technique that helped your patients adopt healthy lifestyle changes, would you use it?**

The questions are easy. But the answers challenge us to change our practice.

Doctors, nurses and other health professionals self-report bias and prejudice against overweight and obese patients. Research demonstrates that obese patients frequently feel stigmatized in health care settings. These patients are more likely to avoid routine preventive care, and when they do seek health services they may receive compromised care. When patients feel stigmatized, they are vulnerable to depression and low self-esteem, they are less likely to feel motivated to adopt lifestyle changes, and some may even turn to unhealthy eating patterns for solace.



Rudd Center, 2017

Obesity Toolkit

Letter From 2015–2016  
ACOG President Mark S. DeFrancesco, MD, MBA

Background and Introduction

Obesity Screening and Assessment of Patient Readiness for Weight Loss

Assessment of Risk Factors

Lifestyle Therapies: Diet, Physical Activity, and Behavioral Strategies

Coding for Obesity

Frequently Asked Questions: Intervention Programs (PDF)

Pharmacologic and Surgical Interventions

Obesity Web Resources Summary

## Obesity Screening and Assessment of Patient Readiness for Weight Loss



**Obesity Screening and Assessing Patient Readiness for Weight Loss**

ACOG's Wellness Work Group on Obesity has identified the following resources to assist obstetrician-gynecologists and women's health care providers in screening their patients for obesity and initiating conversations about weight loss.

### Synopsis and Tools

In this synopsis, ACOG's Wellness Work Group on Obesity explores common pitfalls in obesity screening and examines strategies for working with patients on weight loss: [Obesity Screening and Assessing Patient Readiness for Weight Loss \(PDF\)](#)

To complement this synopsis, the Work Group also developed an [Obesity Assessment Algorithm](#) and a [Body Mass Index Table](#).

### Web Resources

ACOG's Wellness Work Group on Obesity has identified the following resources as potentially helpful in screening patients for obesity and assessing readiness for weight loss.

[STOP Obesity Alliance](#)

American Congress of Obstetricians and Gynecologists, 2017



# Motivational Interviewing

- *How ready* do you feel to change your eating patterns and/or lifestyle behaviors?
- *How* is your current weight affecting your life right now?
- What *kinds of things have you done* in the past to change your eating?
- What strategies *have worked for you* in the past?
- *Some people* talk about part of them wanting to change their eating patterns, and part of them not really wanting to change. Is this true for you? On a scale from 1-10, how ready are you to make changes?
- What was *your life* like before your weight increased?
- What makes *you feel* like you can continue to make progress if you decide to?
- What are *your hopes* for the future if you are able to become healthier?



# Motivational Interviewing

## Step 1: Ask permission

- Can we take a few minutes to discuss your health and weight? *Proceed only if the client agrees.*

## Step 2: Share BMI

- Your BMI is \_\_\_\_\_. Do you have any questions about BMI and how it relates to your health?

### *Questions to consider asking:*

- How do you feel about your health?
- Is there anything you would change to be healthier?
- What do you think is keeping you from making some of those changes?
- What do you think would help you make some of those changes?

## Step 3: Assess readiness

- How ready are you to take the next step to make a change to improve your health? On a scale of 0-10, with 0 being not ready at all and 10 being completely ready, where are you?
- Not ready (0 - 3) What might make you more ready?
- Getting ready (4 - 6) What might your next steps be?
- Ready (7 - 10) What is your plan?

## Step 4: Close

- Summarize patient's ideas/perspectives/identified next steps.



# Summary

- Reference current research on obesity and reproduction
- Discuss how weight bias influences healthcare
- List principles of motivational interviewing (MI) and how it can encourage lifestyle change

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