Trends and Issues: Education of the Public Regarding Obesity Prevention

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Obesity is spreading throughout the United States (U.S.) in epidemic proportion. Prevalence of obesity is reported in the literature from 65 to 66.3% in adults while the prevalence of obesity in U.S. children (ages 6-19) is approximately 17% with an additional 15% considered overweight (Johnson, Clark, Goree, O’Connor & Zimmer, 2006; Jordan & Haywood, 2007; Stephens, Blanken, Greiner & Chumley, 2008; Saperstein, Atkinson, & Gold, 2007). In order to combat such growing numbers, clinicians, public health officials and, quite possibly, health science librarians must become proactive in education of prevention measures. Efforts have been underway by state and national governments, national physician groups such as the American Academy of Pediatrics (AAP), national nurse practitioner organizations such as the National Association of Pediatric Nurses in Advanced Practice (NAPNAP), and health organizations such as The Institute of Medicine and the Department of Health and Human Services to improve outreach programs and public education (Rhodes, 2008; Pomeranz & Kelly, 2008; Texas Pediatric Society, 2005).

Literature Search

In order to identify trends related to public education for prevention of obesity, a brief literature search using Medline and CINHAL and the search terms “education AND pediatric AND obesity” was conducted. The search revealed more than 200 articles related to education of the public regarding obesity. Many articles were related to specific ethnic groups and were disregarded for the purpose of this project. It was also found that information related to education strategies was embedded within the article. This required a careful review of the article prior to discarding. Four major trends in public education were identified using this method: 1) The use
of printed material (handouts or posters); 2) the use of mass media (television); 3) the use of electronic media (internet) and 4) the use of legislation.

Printed Material

Printed material has long been a preferred option for health care education. In medical offices across the U.S., health care providers rely on printed literature to emphasize or reinforce information discussed during routine “well” exams. Additionally, handouts are often utilized to highlight certain disease processes, treatment algorithms and expected outcomes. In a recent study conducted by Barlow, Richert, and Baker (2007), eight primary care pediatricians were interviewed to determine practices related to identification of obese children, recommended therapy for obese children and families, and improvements for the future. The pediatricians felt that handouts were integral to the structure of the office visit. The researchers took this idea further to include the need for familial input into development of improved handouts. The researchers reported that qualitative studies conducted prior to their interviews revealed the stated need of parents for handouts on healthier eating at fast food restaurants, family activities and healthy snacks and recipes.

In a study conducted by Stephens, Blanken, Greiner, and Chumley (2008), a 2-phase study was conducted in a family medicine residency clinic to investigate the effect of a visual prompt (poster) on the frequency of weight loss conversations between patients and physicians during routine office visits. The study included 283 patients in the pre-intervention group and 386 patients in the post-intervention group. Surveys were conducted for patients in each phase related to weight loss. The data were not significant for difference between the groups in terms of whether or not the posters impacted their decision to discuss weight loss with the physicians. This insignificance may be related to an issue discussed by the pediatrician group interviewed by
Barlow, Richert, and Baker (2007). This group identified motivation prior to clinic visits as an indicator of failure or success in weight loss. One could infer that this same motivation impacts a patient’s willingness to discuss weight loss with their physician.

**Mass Media**

Mass media has been an avenue for advertisers and manufacturers to educate the public about their concepts and products. For example, in the early 1970’s, tobacco companies were able to flood the networks with advertisements for cigarettes. Conversely, mass media may also project messages such as anti-drug campaigns or recycling campaigns. With the increase of pediatric obesity, it is not uncommon to see child actors who are considered, according to body mass indices, overweight or obese. Specifically, the Disney Channel series, *That’s So Raven*, has two stars that are considered overweight or obese. This could be related to Bandura’s social learning theory which focuses on the importance of observational learning and behavioral modeling (Valente, et. al, 2007).

Researchers in entertainment education have long subscribed to this idea. Valente, et. al (2007) from the Department of Preventative Medicine at University of Southern California (U.S.C.), evaluated a minor storyline on *ER* about teen obesity, hypertension and 5-A-Day. The evaluators of the storyline reported that the average viewing for the final three episodes of ER in 2004 was 24.8 million U.S. viewers ages 2 and up. Writers for the series contacted U.S.C.’s Hollywood, Health, and Society (HH&S) project to discuss the prevalence of hypertension and heart disease among overweight teenagers. During this series of meetings, writers were given current information related to the issues above and were also given information on key messages such as “5 A Day, lifestyle, environment and access to care” (Valente, et. al, 2007).
Ultimately the story line was written to include a character who was an overweight African American teenager with poor dietary habits. He lived in an urban housing project with a single mother. During his ER visit he was given information regarding his hypertension, dietary measures and physical activity recommendations. Surveys were completed before and after the three episodes aired. Measurements of the surveys were considered cautiously as data were self-reported. There was a positive association between viewing the minor story line and self-reported changes in behavior among all of the surveys conducted. There were few African Americans in the study group. Thus, it was difficult to further demonstrate the effectiveness of the intervention within the targeted group. Researchers were happy to report that overall, the intervention was successful, low cost and reached a potentially large audience.

Electronic Media

Several of the articles reviewed discussed the role of the internet in educating the public regarding health issues (Barlow, Richert, & Baker, 2007; Saperstein, Atkinson, & Gold, 2007; Jordan & Haywood, 2007). With the rising use of electronic media it is difficult to deny or ignore the potential of the internet in reaching the public with information. Unfortunately with its wide accessibility comes abuse. Consumers must be, therefore, not only prepared to use the internet but also to ferret out information that is valid. The internet is utilized to access information related to health by approximately 95 million Americans (Saperstein, Atkinson, & Gold, 2007). Furthermore, 51% of internet users report they have visited online sites for information related to diet and nutrition. Of those, 30% reported information retrieved impacted positive changes related to diet and exercise. Studies reported by the authors were limited in that data were not available regarding the demographic of the internet users, motivation of the internet users, and long term follow-up with users.
In addition to Internet utilization for dietary guidelines, physical activity plans and weight loss programs, it is used for advertising weight loss remedies and supplements. Jordan and Haywood (2007) conducted Internet searches with key terms “herbal weight loss” using search engines Yahoo and Google. The authors evaluated 32 websites for appropriate labeling and safety information. Despite the most common contraindications being related to heart disease, pregnancy or lactation, and high blood pressure, few sites discussed potential drug interactions or adverse reactions. The authors concluded that potential dangers exist surrounding dietary supplements represented on the Internet. These dangers are of great concern to healthcare providers as not all consumers openly discuss use of herbal supplements within the context of routine office visits. It then becomes incumbent on the healthcare provider to initiate conversations with patients and the use of herbal remedies and weight loss supplements.

Legislation

Because the obesity rate in the U.S. is growing at epidemic proportions, healthcare providers are acutely aware of the potential impact education may have on prevention of the condition. Public health officials have joined the crusade for prevention by calling attention to not only the increase in “away-from-home” meals but also the paucity of current nutritional information provided by restaurants (Pomeranz & Kelly, 2008). The officials propose to utilize restaurant menus as a way to educate consumers and potentially impact the growing health concern of obesity by enacting local, state and federal laws for labeling. Pomeranz & Kelly (2008) estimate that the restaurant industry will appreciate more than $537 billion in sales by the end of 2007. And, although nutritional labels are required for all foods and beverages, no nutritional information is required for restaurants. Calorie estimation has become increasingly difficult as the portion sizes have increased. So, despite efforts of consumers to purchase
healthier foods for home consumption, their diligence is challenged as they choose to feed their families at the local diner.

In addition to restaurant labeling laws, other legislative efforts have been made to address the growing concern of obesity, more specifically, to address childhood obesity. Congressional initiatives were begun by revamping the WIC (Women Infants and Children) nutrition program. Rhodes (2008) reports that in 2004 the WIC program was expanded to include not only milk, baby food, cereal, cheese and beans but also fresh fruit and vegetables. The author also reports three bills currently pending that include implementation of recommendations of a task force on childhood obesity, a bill that promotes physical activity in school programs and development of a national strategy that provides grants to fund local programs for fitness. So, from the legislative efforts, education of the public regarding childhood obesity prevention is likely to improve due to the grants awarded to healthcare educators, providers and teachers.

Summary

Childhood obesity is a growing concern within the health care community and even within the public at large. Public awareness is of the obesity epidemic is paramount for its prevention. Current trends in education of the public regarding obesity prevention include the use of printed material (handouts or posters), the use of mass media (television), the use of electronic media (internet), and the use of legislation. Printed material is an obvious resource that has the ability to reinforce teachings completed within the context of a visit to the health care provider. It may, however, be costly to maintain and update. Mass media is another viable option for education regarding obesity prevention. But, given that the U.S. has not adopted the idea of larger body builds as its “beauty symbol”, television and movies may not readily produce such segments in mass. The internet has become an increasingly popular way to communicate with a
large audience. Unfortunately, children may not have open access to using the Internet. Parents must be the mediator for them in retrieving information and then, taking it a step further, determine the accuracy of the retrieved information. Finally, lawmakers may be able to impact nutritional labels, increase required activity in schools, and support research related to obesity. But, even with the legislative efforts, the fight to reduce the rate of childhood obesity is one that will require a concerted effort on the parts of healthcare providers, educators, legislators, parents and families.
References


