



Health Care Delivery

Many people look to their physicians and other health care workers for guidance on health matters; thus, the involvement of health care delivery systems in promoting healthy lifestyles is a natural link. The focus of that involvement should be preventive measures, which may include advice on eating and physical activity, testing for disease risk factors, referrals for treatment, and partnering with other community organizations for health promotion.

RATIONALE

Health care delivery systems can play an important role in promoting physical activity and healthy eating as well as treating overweight and obesity through a variety of methods such as counseling, referral, research, and the provision of incentives and benefits.

Prevention must be emphasized as the most effective and cost-effective approach to avoid-

ing the mortality and morbidity associated with obesity and a sedentary lifestyle. Interventions need to be implemented that encourage children, adolescents, and adults to develop life-long habits that lead to a healthy eating style, active living, and healthy weight. This movement will take the cooperation and commitment of parents, schools, communities, health care providers, and managed care or other health care funding sources to promote positive change in personal health behavior, social norms, and the food and activity environments. Change must be socially acceptable, economically sustainable, and culturally appropriate.

In addition to prevention activities, strategies are needed to provide the assistance and funding for the weight loss and weight management of obese children and adults to control chronic diseases and reduce medication costs. Even modest weight loss in obese adults—between 5% and 10% of body weight—have

been shown to improve glucose tolerance, hyperlipidemia, and blood pressure. Regular physical activity substantially reduces the risk of dying of coronary heart disease; it decreases the risk for colon cancer, diabetes, and high blood pressure; it helps to control weight; it contributes to healthy bones, muscles, and joints; and it reduces symptoms of anxiety and depression.

Programs that successfully motivate or assist people to eat healthier and be more physically active are the cornerstones in the prevention and control of obesity in both children and adults. To reverse the current public health epidemic of obesity, the health care delivery system must implement policies and cost-effective programs to improve the health and the quality of life for every citizen.

The Medicare program has recently added medical nutrition therapy as a benefit, and some managed care plans include policies and procedures to promote nutrition and physical activity education and treatment services. Primary and secondary components in health care settings should include the following objectives:

- Establish priorities for anticipatory guidance in primary care to promote among healthy people, such as eating five fruits and vegetables per day, drinking 1% (or less) fat milk, or getting 30 to 60 minutes of physical activity each day.
- Establish priorities for secondary prevention—for example, the early detection and reversal of risk factors such as elevated blood lipids, high blood pressure, high blood sugar, and weight gain—and include referral to community resources.
- Assess patients and subscribers for their interests in nutrition and physical activity education and self-care; conduct record audits; and determine opportunities for services with potential cost savings.
- Assess the community for assets and needs, such as access to healthy food and to physical activity facilities, and to organizations to partner with for public awareness campaigns, special events, and environmental change.
- In fee-for-service health systems, establish referral and billing procedures for physical therapy and medical nutrition therapy.

SAMPLE ACTIVITIES

1. Establish and promote standards of practice, quality assurance for managed care, and other health care delivery systems such as the *Guide to Clinical Preventive Services*.

2. Provide and promote reimbursement for services of registered dietitians or other proven interventions for nutrition, physical activity, and obesity treatment as per the Institute of Medicine Report recommendations for heart attack, stroke, and diabetes.

3. Establish collaboration with public and private health plans to establish a common set of preventive benefits that reduce the risk pool of the total population.

4. Adopt the clinical preventive guidance from the resources *Bright Futures in Practice: Nutrition* and *Bright Futures in Practice: Physical Activity*.

5. Utilize the Baby Friendly Hospital Initiative to improve breastfeeding initiation and duration rates.

Sample Practices and Programs

KidShape—A family-centered pediatric weight management program, developed in response to the development of type 2 diabetes in Los Angeles youth. This program involves the family in basic education and counseling coupled with physician-directed activities to guide obese youth. Some elements of the program are being reimbursed through MediCal. **Contact:** Naomi Neufeld, ndneufeld@pol.net.

A New Leaf—This program, developed at the University of North Carolina, is a structured nutrition, physical activity, and smoking cessation assessment and intervention program for cardiovascular disease reduction among low-income individuals. New Leaf integrates behavior change theory with nutrition and exercise science in a clinically feasible intervention tool. **Contact:** New Leaf Intervention, www.hpdp.unc.edu/wisewoman.

Bright Futures—These guidelines for professionals provide practical information, effective preventive techniques, and health promotion materials for health supervision of infants, children, and adolescents. The materials include a nutrition guide, a physical activity guide, and information about iron deficiency anemia screening, hyperlipidemia screening,

and hypertension screening. **Contact:** National Maternal and Child Health Clearinghouse, www.brightfutures.org.

Baby Friendly Hospital Initiative—This program recognizes hospitals and birth centers that have taken steps to provide an optimal environment for the promotion, protection, and support of breast-feeding. Hospitals receive the “Baby-Friendly” designation when they successfully implement the WHO/UNICEF “Ten Steps to Successful Breastfeeding.” **Contact:** Baby-Friendly USA, www.babyfriendlyusa.org.

Committed to Kids Pediatric Weight Management Program—an integrated, multidisciplinary team approach to preventing and treating obesity in children. Four program components are conducted in group sessions with support from family and others. Training and consultation staff members are available. Curriculum guides and a procedures manual are available. **Contact:** www.committed-to-kids.com.

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