

While you wait...check out the obesity prevention & mgmt competencies at

<https://bipartisanpolicy.org/library/provider-competencies-for-the-prevention-and-management-of-obesity/>



Tweet using **#obesityprevention**

ASPPH Presents Webinar Series

***The Latest in Prepping Public
Health Students for Obesity
Prevention & Control***

Wednesday, December 13, 2017
1:30- 2:30 p.m. Eastern

ASPPH.ORG

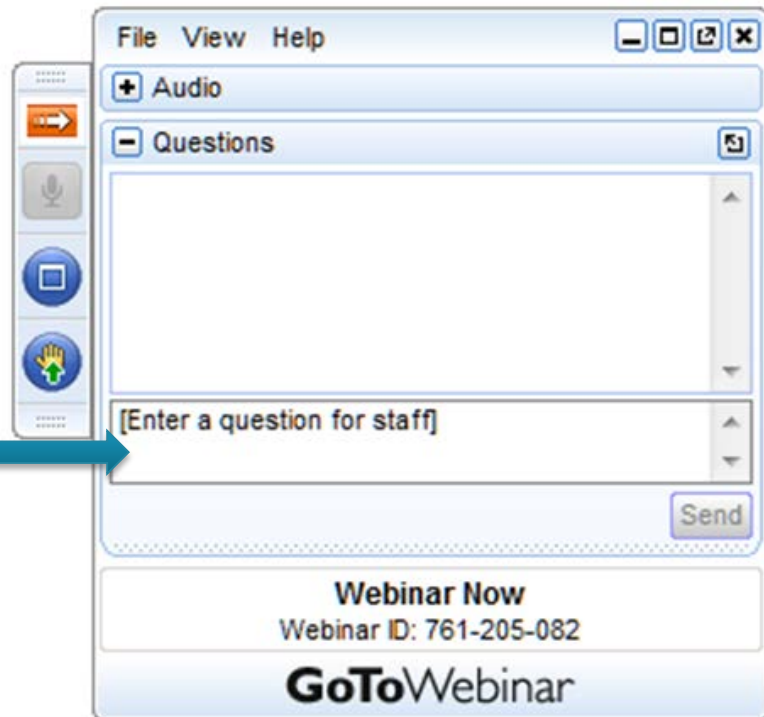
1900 M Street NW, Suite 710
Washington, DC 20036
Tel: (202) 296-1099
Fax: (202) 296-1252

ASPPH Presents
 **WEBINAR**

Method for Submitting Questions/Comments

Join the Conversation...

- You can ask questions in writing anytime during the webinar.
- Simply type them in the “Questions” field on the right side of your screen.



ASPPH Presents
▶ WEBINAR

Sponsors and Moderator



Milken Institute School
of Public Health

THE GEORGE WASHINGTON UNIVERSITY

Sumner M. Redstone
Global Center for
Prevention & Wellness



Elizabeth Weist

Association of Schools and Programs of Public Health

Who and Why?

Target Audience

Faculty, staff, and students at
Council on Education for Public
Health (CEPH)-accredited schools
and programs

Webinar Objective

To introduce the new
obesity provider
competencies

Learning Objectives

- Identify the Provider Competencies for the Prevention and Management of Obesity
- Describe three examples of academic public health activities to prepare students to work interprofessionally in obesity prevention and control
- Reflect on methods to apply the new Provider Competencies...into one's own curricular and practice offerings

CPHCE
Credits

Today's Presenters



**Don Bradley, MD,
MHS-CL**
Duke University
School of Medicine



**Solveig Argeseanu
Cunningham, PhD,
MSc**
Emory University
Rollins School of
Public Health



David Sarwer, PhD
Temple University
College of Public
Health



**Hala Madanat, PhD,
MS**
San Diego State
University
Graduate School of
Public Health

Presenter #1



Don Bradley, MD, MHS-CL
Duke University
School of Medicine

Provider Competencies for the Prevention and Management of Obesity

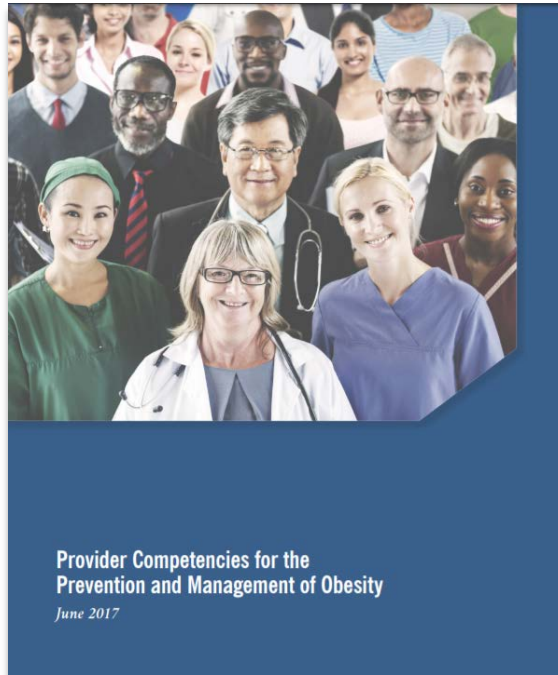
Released June 2017

ASPPH.ORG

1900 M Street NW, Suite 710
Washington, DC 20036
Tel: (202) 296-1099
Fax: (202) 296-1252



Interprofessional Provider competencies for the prevention and management of obesity



<https://bipartisanpolicy.org/library/provider-competencies-for-the-prevention-and-management-of-obesity/>; Published June 2017

Developed by Broad Group of Expert Organizations

National Academies of
Sciences, Engineering, and
Medicine



Integrated Clinical and Social Systems for the Prevention and Management of
Obesity Innovation Collaborative (ICSSPMO):
“Provider Training and Education Workgroup” (ad hoc activity)

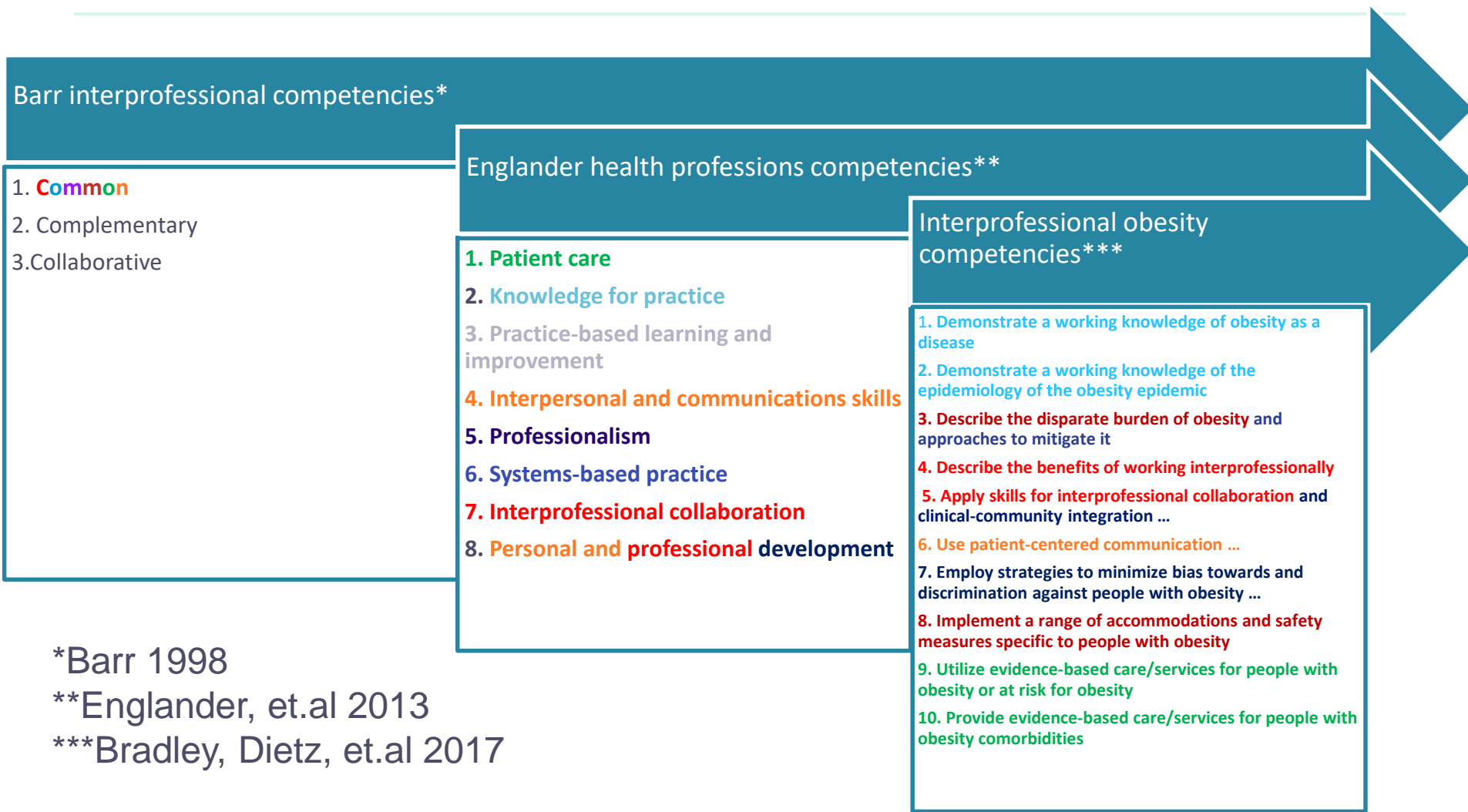


- Academy for Eating Disorders
- Academy of Nutrition and Dietetics
- Accreditation Council for Graduate Medical Education
- American Academy of Family Physicians
- American Academy of Pediatrics
- American Association of Colleges of Nursing
- American Association of Colleges of Osteopathic Medicine
- American Association of Colleges of Pharmacy
- American Board of Obesity Medicine
- American Council of Academic Physical Therapy
- American Dental Education Association
- American Kinesiology Association

- American Psychological Association
- Association for Prevention Teaching and Research
- Association of American Medical Colleges
- Association of Schools and Programs of Public Health
- Centers for Medicare and Medicaid Services
- Interprofessional Education Collaborative
- National Organization of Nurse Practitioner Faculties
- Physician Assistant Education Association
- Society for Public Health Education
- Society of Teachers of Family Medicine
- The Obesity Society
- YMCA of the USA

Support for the development of these competencies was provided by the Robert Wood Johnson Foundation. The competencies do not necessarily represent the views of any one organization, the Robert Wood Johnson Foundation, the Collaborative, the Roundtable, or the National Academies of Sciences, Engineering, and Medicine, and have not been subjected to the review procedures of, nor are they a report of, the National Academies.

The Development Framework for Interprofessional Obesity Competencies



*Barr 1998

**Englander, et.al 2013

***Bradley, Dietz, et.al 2017

The Competency Development Process

- **Step 1: Define Terms, Scope, Application**
- **Step 2: Identify and Engage Diverse Stakeholders**
- **Step 3: Collect Data**
- **Step 4: Draft Competencies, SME Review, Reactor Panel/Survey**
- Step 5: Apply the Competencies (Curricular Design, Process Improvement, Program Evaluation)
- Step 6: Periodic Review and Updates

Competencies Overview

- 10 high level competencies
- Developed for health professionals actively engaged in obesity prevention/management
- Not intended to specify how specialties implement the competencies.

“Profession-specific areas related to obesity prevention and management (e.g. pharmacotherapy) were deliberately excluded to maximize the relevance of the competencies to all health professions.”



Core Obesity Knowledge

- Obesity as a medical condition
- Epidemiology & key drivers of the obesity epidemic
- Disparities / inequities in obesity prevention & care



Interprofessional Care

- Interprofessional obesity care
- Integration of clinical & community care systems



Patient Interactions

- Evidence-based strategies for patient care
- Discussions & language related to obesity
- Recognition & mitigation of weight bias & stigma
- Respectful accommodations for people with obesity
- Special considerations for comorbid conditions

<https://bipartisanpolicy.org/library/provider-competencies-for-the-prevention-and-management-of-obesity/>; Published June 2017

Obesity Care Competencies

- 1.0: Framework of obesity as a medical condition
- 2.0: Epidemiology and key drivers of the epidemic
- 3.0: Disparities and inequities in obesity prevention care
- 4.0: Interprofessional obesity care
- 5.0: Apply skills necessary for integration of clinical and community care for obesity
- 6.0: Use patient-centered communication

People First Language

- Overweight is a description
- An “obese person” is an identity – he or she is obese, not a father, mother, or a person characterized by their achievements
- An “obese person” is more likely to be held responsible for their weight
- Obesity is a disease
- Describing a person with obesity focuses attention on cause

The Importance of Language

Language to Use

Overweight

Increased BMI

Severe obesity

Unhealthy weight

Healthier weight

Improved nutrition

Physical activity

Language to Avoid

Fat

Obese

Morbid obesity

Diet (or dieting)

Exercise

Obesity Care Competencies

7.0: Recognition and mitigation of weight bias and stigma

8.0: Implement accommodations specific to people with obesity

9.0: Utilize evidence-based care/services for people with obesity

10.0: Provide evidence-based care and services for people with obesity comorbidities

The Competency Development Process

- Step 1: Define Terms, Scope, Application
- Step 2: Identify and Engage Diverse Stakeholders
- Step 3: Collect Data
- Step 4: Draft Competencies, SME Review, Reactor Panel/Survey
- Step 5: Apply the Competencies (Curricular Design, Process Improvement, Program Evaluation)**
- Step 6: Periodic Review and Updates**

Expected Impact of the Obesity Competencies

- Support curricular materials and evaluation tools for teaching and assessing obesity prevention and care
- Support faculty development programs for the teaching and assessment of obesity prevention and care
- Provide a common language for clinical and population health experiences

Provider Competencies for the Prevention and Management of Obesity

<https://cdn.bipartisanpolicy.org/wp-content/uploads/2017/06/Provider-Competencies-for-the-Prevention-and-Management-of-Obesity.pdf>

Presenter #2



Solveig Argeseanu Cunningham, PhD, MSc
Emory University
Rollins School of Public Health

Teaching about Obesity: Data Analysis and Community Partnerships

ASPPH.ORG

1900 M Street NW, Suite 710
Washington, DC 20036
Tel: (202) 296-1099
Fax: (202) 296-1252



Teaching about Obesity

- Classroom-based learning
 - Substantive course on obesity
 - Epidemiology, social contexts, evidence-based prevention
 - Methodology course with obesity as possible area for research
- Community-based learning /engagement
 - Research and practice with NGO partners

Course-based Learning

- Challenges
 - Mixed interest
 - A common-sense disease?
 - Prejudices and expectations about obesity and about people with obesity
- Strategies
 - Begin course with a news search and a quiz
 - Include literature from multiple disciplines
 - Epidemiology, nutrition, sociology, etc.
 - Engage with the controversies
 - Provide opportunities for first-hand experience with analyses

Opportunities for First-hand Experience with Analysis

- Analysis of quantitative datasets
 - Stata or other statistical program
 - Provide pre-cleaned, simple or simplified dataset
- Analysis of qualitative datasets
 - Examine texts, narratives
 - Manual/Excel coding, NVivo or other software
- Development of instruments for collection of quantitative, qualitative, or textual data

Some Useful Datasets

Nationally representative datasets with easily accessible public-use versions

- Childhood obesity – both with direct-measured anthropometrics
 - ECLS-K - Early Childhood Longitudinal Study, Kindergarten Cohort
 - AddHealth – National Longitudinal Study of Adolescent Health
- Adult obesity
 - NHIS – National Health Interview Survey
 - BRFSS – Behavioral Risk Factor Surveillance System
- International levels and trends
 - DHS – Demographic and Health Surveys

Community-based Learning Structures

- Practicum (MPH requirements)
- Rotation (PhD requirements)
- Thesis and dissertation
- Volunteer work or internship

Community-based Engagement

- Finding opportunities
 - Ongoing faculty relationships
 - Office of University-Community Partnerships
- Work with NGOs
 - Program development
 - eg. Development of a curriculum for teaching about fruits & veg and physical activity to English-language learners
 - Program augmentation
 - eg. Expanding existing diabetes prevention program to Arabic speakers
 - Evaluation
 - eg. School-based healthy living program with multiple components
 - Proposal development
 - eg. Developing a well-sampled and powered study to assess the role of sleep for obesity prevention

Presenter #3



David Sarwer, PhD
Temple University
College of Public Health

1.0 Demonstrate a working knowledge of obesity as a disease

- Key measures and their limitations for the assessment of obesity and its comorbidities (BMI and Waist Circumference)
- The potential role of genetics/epigenetics, critical periods (e.g., prenatal development), and natural history to obesity and its complications
- The pathophysiology of obesity

1.0 Demonstrate a working knowledge of obesity as a disease (Cont.)

- The psychosocial, behavioral, cultural, economic, home, community, and environmental impacts on obesity
- Evidence-based lifestyle behaviors (such as dietary intake, physical activity, inactivity, and sleep) that propel and sustain obesity at the individual and family/caregiver level
- An approach to the prevention and management of obesity that integrates clinical and community systems as partners in health care delivery

2.0 Demonstrate a working knowledge of the **epidemiology** of the obesity epidemic

- The demographics and evolution of the obesity epidemic
- The social, cultural, environmental, and other factors that have contributed to the obesity epidemic

3.0 Describe the disparate burden of obesity and approaches to mitigate it

- 3.1 Address the role of **inequities** associated with and/or determinants of obesity and its outcomes
- 3.2 Discuss the specific barriers related to **access to care** and community resources for people with obesity and those at risk
- 3.3 List potential strategies to reduce inequities in obesity prevention and care

4.0 Describe the benefits of working **interprofessionally** to address obesity to achieve results that cannot be achieved by a single health professional

- 4.1 Summarize the value and rationale for including the skills of a diverse interprofessional team in treating obesity
- 4.2 Summarize the needs and opportunities for collaboration/integration among providers and clinical and community systems to prevent and mitigate obesity

5.0 Apply the skills necessary for effective interprofessional collaboration and integration of clinical and community care for obesity

- 5.1 Perform effectively in an interprofessional team
- 5.2 Promote the development and use of an **integrated clinical-community care plan**
- 5.3 Collaborate with **community organizations** to advocate for nutrition and physical activity services, programs, and/or policies that address obesity

6.0 Use **patient-centered communication** when working with individuals with obesity and others

- 6.1 Discuss obesity in a non-judgmental manner using person-first language in all communications
- 6.2 Incorporate the environmental, social, emotional, and cultural context of obesity into conversations with people with obesity
- 6.3 Use person- and family-centered communication (e.g., using active listening, empathy, autonomy support/shared decision making) to engage the patient and others

7.0 Employ strategies to minimize bias towards and discrimination against people with obesity, including weight, body habitus, and the causes of obesity

- 7.1 Describe the ways in which **weight bias and stigma** impact health and wellbeing
- 7.2 Recognize and mitigate personal biases
- 7.3 Recognize and mitigate the weight biases of others

8.0 Implement a range of accommodations and safety measures specific to people with obesity

9.0 Utilize evidence-based care/services for people with obesity or at risk for obesity

- 9.1 Identify **credible information** to support obesity care
 - 9.1.a Appraise sources of evidence
- 9.2 Evaluate BMI and other anthropometric measures routinely
- 9.3 Identify physical and psychosocial comorbidities of obesity and their potential impact on the health of the patient

9.0 Utilize evidence-based care/services for people with obesity or at risk for obesity (Cont.)

- 9.4 Engage relevant health professionals to initiate a comprehensive care plan using **shared decision-making** within the patient's context
- 9.5 Identify access-to-care barriers for patients with obesity and solutions to mitigate those barriers
- 9.6 Employ evidence-based individual and family behavioral-change strategies such as motivational interviewing and cognitive behavioral therapy

10.0 Provide evidence-based care/services for people with obesity comorbidities

- 10.1 Recognize when a person is experiencing urgent and emergent comorbidities related to obesity
- 10.2 Respond appropriately to people with obesity comorbidities based on scope of practice

Presenter #4



Hala Madanat, PhD, MS
San Diego State University
Graduate School of Public Health

GSPH's Resources and Capacity

- Expertise in multi-level community-based interventions to reduce health disparities
 - Focus on obesity prevention
- Located in a border region
 - Binational expertise
- Strong Community Partnerships
 - SD- Health & Human Services Agency
 - Federally qualified health centers
 - Community-based organization (e.g. Chula Vista Community Collaborative)
 - Faith-based organizations
 - Schools
 - Recreation Centers



IBACH Personnel

28 Investigators,
including 16 SDSU TT faculty



3 Post Doctoral
Students



9 Doctoral Students



1 IT System
Administrator



1 Institute
Manager



6 Administrative Assistants



9 Project Managers



Integration into Student Practicum

Example from our CDC-funded San Diego PRC

- Intervention design
- Training and material development
- CAB involvement
 - Community Presentations
- Evaluation
 - Process
 - Outcomes: BMI, PA, observations
- Dissemination
 - Toolkit
- Data analysis and Writing
 - Thesis/ Publications



Primary aim: incorporating obesity prevention and control examples into required courses and dedicating courses to indepth training.

- Examples integrated into required courses
 - E.g. Theoretical Foundations
- Dedicated electives
 - Obesity on the Border- taught on the UABC campus
 - Childhood obesity taught with County HHSA support for application
 - Competencies

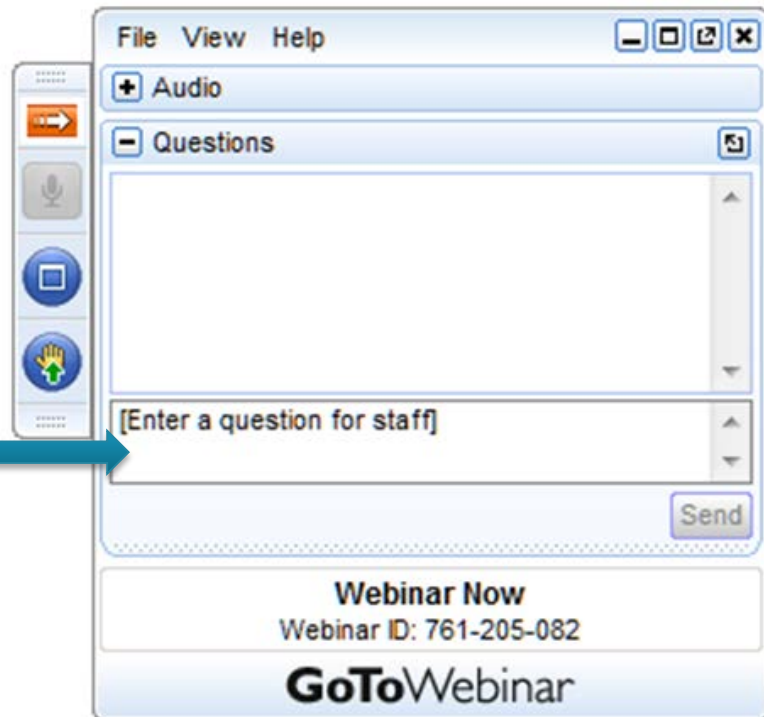


Time for Q&A & Discussion

Method for Submitting Questions/Comments

Join the Conversation...

- You can ask questions in writing anytime during the webinar.
- Simply type them in the “Questions” field on the right side of your screen.



ASPPH Presents
▶ WEBINAR

Discussion with Today's Presenters



Don Bradley
Duke University
School of Medicine



**Solveig Argeseanu
Cunningham**
Emory University
Rollins School of
Public Health



David Sarwer
Temple University
College of Public
Health



Hala Madanat
San Diego State
University
Graduate School of
Public Health

Opening up the Floor

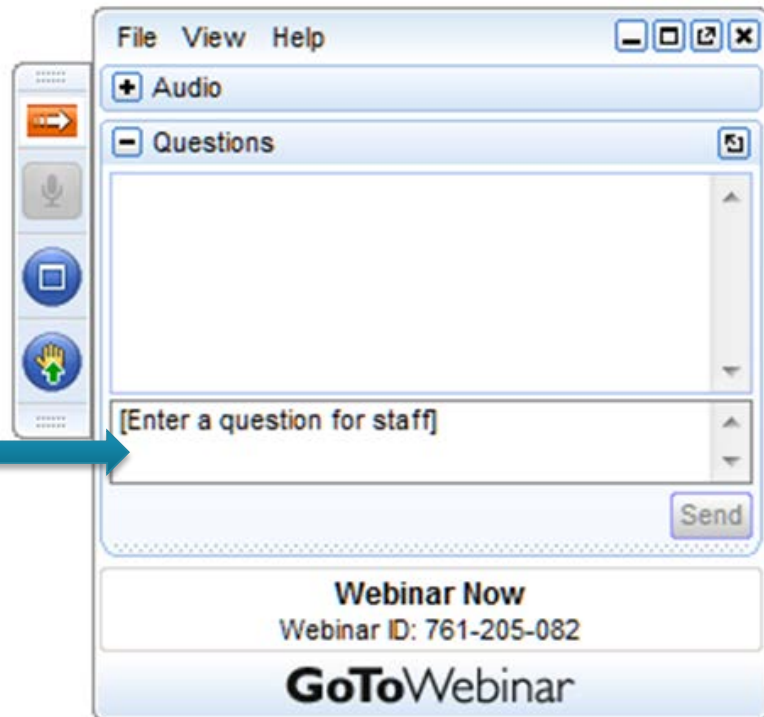
1. Are you using the obesity competencies? Do you have any comments or questions about them?
2. What reactions do you have on the activities at Emory, Temple, and San Diego State University that you just heard?
3. What didactic and practice experiences are working in preparing your students to tackle obesity?
4. What do we need to do better in public health to prepare our students to work interprofessionally in obesity prevention and control?

Time for Q&A & Discussion

Method for Submitting Questions/Comments

Join the Conversation...

- You can ask questions in writing anytime during the webinar.
- Simply type them in the “Questions” field on the right side of your screen.



ASPPH Presents
▶ WEBINAR

Thank You to Today's Presenters



Don Bradley
Duke University
School of Medicine



**Solveig Argeseanu
Cunningham**
Emory University
Rollins School of
Public Health



David Sarwer
Temple University
College of Public
Health



Hala Madanat
San Diego State
University
Graduate School of
Public Health

Obesity Competencies at www.aspph.org



Obesity Competencies at www.aspph.org

Workforce

To meet the training and continuing education needs of the public health workforce, ASPPH: (a) developed workforce-level competencies in public health preparedness and response, and (b) collaborated with over 20 partners to produce provider competencies for the prevention and management of obesity.

Public Health Preparedness & Response Model



Prevention and Management of Obesity Competency Model



Thank You!

This webinar has been recorded and will be available on the webinar event page on the ASPPH website soon:

<https://www.aspph.org/event/aspph-presents-the-latest-in-prepping-public-health-students-for-obesity-prevention-control/>

Contact: sweiner@aspph.org

CPHCE
Credits

Coming Attractions...

ASPPH Presents



WEBINAR

ASPPH Presents Webinar Featuring Honorable Mentions for Delta Omega Innovative Public Health Curriculum Award

Friday, January 12, 2:00 p.m. – 3:00 p.m. Eastern

ASPPH Presents Delta Omega Innovative Public Health Curriculum

Friday, January 26, 2:00 p.m. – 3:00 p.m. Eastern

For more information about and to register for upcoming webinars, visit the
ASPPH Events page:

<http://www.aspph.org/events/category/webinar/>

Coming Attractions...

Registration Now Open



2018 ASPPH
ANNUAL MEETING
MARCH 7-9 • ARLINGTON, VA

UNDERGRADUATE
Public Health and Global Health Education
..... SUMMIT
MARCH 7, 2018 • ARLINGTON, VA