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**Use of a non-dieting approach to support weight
management patients to improve eating behaviours
and dietary intake.**

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Abstract

Background/Aim: Overweight and obesity numbers continue to increase locally and internationally. It is well known that the ability to make and maintain dietary changes long-term is difficult for many individuals. In recent years, weight management focus has moved towards understanding the impact of psychological factors on managing weight and supporting related changes. This pilot study explored whether a non-dieting programme is an effective intervention for people within the hospital system classified as overweight and obese.

Methods: Participants (n=31) were enrolled in a 28-week intervention study: 1-3 month normal diet run-in; 4-week group intervention programme; 24 weeks of follow-up including 3 individual follow-up sessions over 3 months. Data was collected at baseline, at the end of group sessions and at the individual sessions for anthropometry, behavioural and cognitive approaches to food, dietary intake and changes in eating habits.

Results: Positive change was observed in emotional and external trigger eating style scores, decreasing from 2.67 ± 1.04 and $3.06 \pm .67$ respectively at baseline to $1.98 \pm .86$ ($P < 0.002$) and $2.56 \pm .63$ ($P < 0.001$) at 6-month follow-up. Participants' reported mean ($\pm SD$) intuitive eating level increased from 35.9 ± 22.0 to 60.0 ± 23.5 from baseline to end of intervention ($P < 0.000$), increasing further at the 6-month follow-up (67.50 ± 26.356) ($P < 0.001$). Participant's median [95%CI] confidence levels increased significantly after completing the group sessions, from $6.0 [5, 7.5]$ up to $8.0 [7, 9]$ ($P < 0.001$, $r = 0.8$) and confidence levels remained higher, $7.5 [5, 8]$, at 6-month follow-up. Mean ($\pm SD$) weight did not change significantly during the study; 112.33 ± 26.67 kg at baseline and 112.04 ± 28.52 kg at 6-month follow-up.

Conclusions: Group-based intuitive eating weight management programmes can support participants to start making changes to improve their food-related behaviour and lifestyle to improve wellbeing and health.

Keywords: *Non-dieting, intuitive eating, group education, weight management*

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List of Abbreviations

BMI	Body Mass Index
CBT	Cognitive Behaviour Therapy
CM	Centimetre
DEBQ	Dutch Eating Behaviour Questionnaire
DHB	District Health Board
EI	Energy In
EO	Energy Out
FFQ	Food Frequency Questionnaire
HDEC	Health and Disability Ethnics Committee
HRQL	Health Related Quality of Life
IES	Intuitive Eating Scale
iPMS	Patient Information System
Kg	Kilogram
M	Metre
MOH	Ministry of Health
OECD	Organization for Economic Cooperation and Development.
Q-LES-Q-SF	Quality of life enjoyment and satisfaction Questionnaire – short form
QOL	Quality of Life
REE	Resting Energy Expenditure
SD	Standard deviation
NZ	New Zealand
WG	Wholegrain
WHO	World Health Organisation

Contribution to Research

Table 0.1: *Contributions to this study*

Researchers	Contribution to this thesis
Franica Yovich, NZRD	Main researcher, Eating for your Health facilitator, participant recruitment, screening, and testing, data collection, data analysis, statistical analysis, interpretation and discussion of results.
Associate Professor Rozanne Kruger	Main academic supervisor and guidance with design of thesis, methods, statistical analysis, interpretation of results, and revision.
Dr Beverly Haarhoff	Academic supervisor and guidance with design of thesis, methods, statistical analysis, interpretation of results, and revision.
Nikki Renall, NZRD	Eating for your Health facilitator
Reena Soniassy, NZRD	Assessment and review of participants in clinic and data collection
Erna van der Watt, NZRD	Assessment and review of participants and data collection
Zakiya Bi-Hussein	Data collation and entry