Eat Smart, Move More, Weigh Less:
A Community-Based Weight Management Program for Adults

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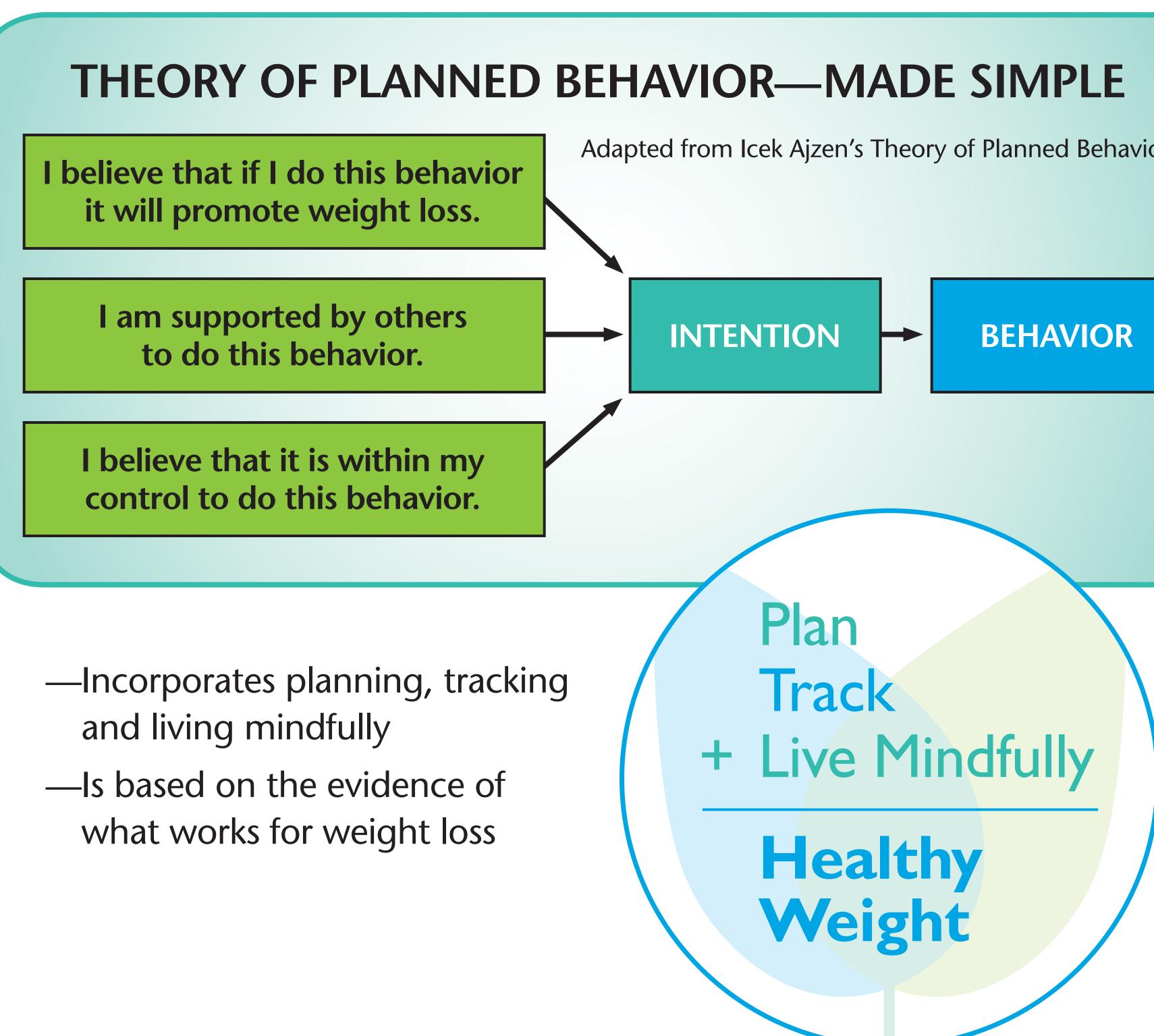
Eat Smart | Move More
Weigh Less

INTRODUCTION

Obesity is now widely recognized as one of the most pressing public health challenges in the United States. **Eat Smart, Move More NC** is a statewide movement that promotes increased opportunities for healthy eating and physical activity wherever people live, learn, earn, play and pray. **The Eat Smart, Move More, Weigh Less** curriculum supports this movement with group education and social support.

Curriculum Development

- A multidisciplinary development team reviewed the scientific literature and identified strategies proven to be effective for weight loss and weight management. The team developed lesson plans based on these strategies
- The curriculum was reviewed by local, state and national experts and revised
- The curriculum:
  —Is based on the Theory of Planned Behavior

THEORY OF PLANNED BEHAVIOR—MADE SIMPLE

Adapted from Icek Ajzen's Theory of Planned Behavior

I believe that if I do this behavior it will promote weight loss. → INTENTION → BEHAVIOR

I am supported by others to do this behavior.

I believe that it is within my control to do this behavior.

—Incorporates planning, tracking and living mindfully
—Is based on the evidence of what works for weight loss

Plan
Track
+ Live Mindfully

Healthy Weight

Dissemination

- In fall 2007, the development team conducted training for 200 Family & Consumer Science Agents from Cooperative Extension and health department Health Promotion Coordinators (health educators) representing 85 of NC's 100 counties.
- Training components:
  —Curriculum content, including the theory of planned behavior
  —The evidence for what works for weight loss
  —Basics in medical and surgical obesity management, as well as an overview of popular supplements
  —Strategies for successfully marketing and operating weight management programs
- In January 2008, classes launched in 38 counties.
- Classes were held primarily in worksites, with some held in schools, churches and other community settings.
- Average cost to participants was $20, ranging from $5 to $75.

Evaluation Methods

- Each participant completed anthropometric measures at the first class including:
  —Blood pressure
  —Waist circumference
  —Height, weight (BMI calculated)
- Each participant completed a survey during the last class to report behavior change and provide feedback on the curriculum.
- Each participant completed post-curriculum anthropometric measurements.
- Each instructor completed a survey to provide feedback on the curriculum.

Make low-calorie choices

PLAN + TRACK + LIVE MINDFULLY = HEALTHY WEIGHT

Eat Smart | Move More
Weigh Less

Exercises for strength, endurance and flexibility

Strategies to help right-size your portions

Easy recipes

The Magazine

The Personal Journal

Journal

Lessons and Key Messages

LESSON	CORE CONCEPT
Introduction	Weight Loss Readiness; Plan, Track & Live Mindfully
Make Your Commitment	Setting realistic goals
Re-Think Your Drink	The role of calorie containing beverages in weight loss and strategies for managing beverage calorie intake
Eat Fewer Calories	Use of lower calorie food preparation techniques
Move More	The role of regular physical activity in weight management
Check the Facts	Label reading
Enjoy More Vegetables	Vegetables as a strategy for limiting calorie intake
Right-Size Your Portions	The role of portion sizes in weight management and strategies for portion control
Plan, Shop, Fix and Eat	The role of home cooked meals in managing weight and strategies for preparing and eating more meals from home
Eat Less Fast Food	The role of fast food in unhealthy weights and strategies for managing fast food intake
Move Strong	The role that strength training plays in weight management
Enjoy More Fruit	The role fruit plays in controlling calorie intake
Start Smart	The role breakfast plays in managing weight
Move Forward	The role of progressively more exercise in weight loss and weight maintenance
Keep Your Commitment	Setting realistic goals to maintain weight loss and planning for special occasions
Eat Out Less	The role that meals away from home play in unhealthy weight and strategies for eating at home more often
Tame the Tube	The role that television—and other screens—play in weight management and strategies for controlling screen time
Pack Smart Lunches	How to plan and pack healthy, low-calorie lunches
Enjoy More Whole Grains	The role that whole grains play in weight management and strategies for eating more

Participant Demographics[1]

- 821 participants from 38 NC counties
- Average age: 51 years
- 86.1% female; 9% male
- 22.5% African American; 1.2% Hispanic/Latino; 66.3% White; 10% Other

Results[2]

- Overall weight loss for the cohort averaged 7 pounds (p <.0001), representing a 3.6% decrease in body weight
  — mean 192# pre; 185# post
- 85.7% of participants improved BMI
  — mean 32.4 pre; 31.1 post; n=647
- 77.4% reduced waist circumference
  — mean 40.2" pre; 38.6" post; n=681
- 58.5% lowered both systolic and diastolic blood pressure
  — mean systolic 128 pre; 124 post; mean diastolic 79 pre; 77 post; n=289
- Most reported improving dietary habits
  — 86.7% report eating fewer calories; 88.1% reduced portions
- Fewer participants reported increasing physical activity beyond 30 minutes per day
  — 40.3% reported being active more than 30 minutes per day, while 49.5% reported adding strength training
- 91.7% of participants were more mindful of what and how much they eat

Behavior	% Yes	% Already Doing This	% No
Active more than 30 minutes per day	40.3	14.2	45.3
Include strength training	49.5	11.4	39.0
Eat fewer calories	86.7	6.6	6.6
Eat smaller portions	88.1	6.8	5.1
Am more mindful of what I eat	91.7	7.1	1.1

CONCLUSIONS

- The curriculum appears to be successful in aiding modest weight loss.
- Participants were more successful at changing dietary behaviors and becoming mindful of eating behaviors; they were less successful with achieving more aggressive exercise recommendations.
- Initial feedback was very positive from both participants and instructors.
- The content can be covered in 15 classes, rather than 19, by collapsing some topics.
- This delivery model appears to meet a need in the community for low-cost weight management offered in non-health care settings.

[1]Missing data in some cases if total not equal to 100   [2]The results are preliminary as of May 2009.