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Obesity now affects more than one in four adults and one in five children aged 11 or over in the UK, resulting in a range of associated health problems and placing a huge burden on the health system. Urgent action is therefore required to support weight management across the population and find effective treatments to address obesity and related health problems. However, the increase in the prevalence of obesity has not been matched with a corresponding emphasis on education and training for healthcare professionals (HCPs) to equip them to deal with the complex nature of the condition.

The 2010 report by the Royal College of Physicians, titled “The training of health professionals for the prevention and treatment of overweight and obesity” claimed that healthcare professionals had a poor understanding of obesity, including social and environmental determinants, the complexity of nutritional issues and physical activity, and barriers to changing health-related behaviours, and as a result would often ignore patients’ excess weight or simply tell them to go on a diet to lose weight. The report linked this lack of understanding to the limited teaching provided in both undergraduate and postgraduate training programmes for HCPs and minimal focus on weight management in specialist medical training. The reason for this is that weight management has traditionally been seen as a lifestyle issue, not a medical problem, so HCPs have abdicated responsibility.

As well as making sure all HCPs have an understanding of the complex nature of obesity, there are two key areas of obesity care training that could make a significant difference to outcomes:

- Training for all HCPs in starting opportunistic conversations with patients about weight

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- Training of at least one GP, and ideally one nurse, in every surgery as a practitioner with a special interest in obesity - obesity specialist Professor Tony Leeds has called for “an army of obesity GPs, nurses and dietitians” in primary care clinics.

While it is, of course, important that the education and training requirements for HCPs have been identified, the bigger challenge is to follow this up with courses and learning opportunities that will deliver this training. Although the UK General Medical Council (GMC) updated its Outcomes for Graduates in 2009 to include the recommendation that medical students should be competent to discuss obesity and behaviour change with patients, a 2013 survey of medical school educators revealed that this was not easily accomplished. They found inconsistencies in the implementation and interpretation of the GMC recommendations and identified a number of barriers to the inclusion and delivery of obesity management education (OME) within undergraduate medical programmes. These included: a lack of clarity about how to design and deliver OME; reluctance of educators to include OME in the curriculum; and perceived lack of student engagement in OME (Chisholm et al. 2013). It was proposed that the dissemination of evidence-based guidelines among medical educators would improve internal support for OME and that enhancing the relevance of OME to students would improve engagement. It was also suggested the GMC should introduce specific learning objectives and obesity management competencies for medical students. These competencies have not materialised from the GMC, but in the USA, the Obesity Medicine Education Collaborative (OMEC) published preliminary obesity medicine competencies in 2019 to be used by medical training programmes (Kushner et al. 2019). A survey of US medical schools was carried out to determine to what extent they meet the OMEC competencies, which revealed that only 10% of respondents believed their students were “very prepared” to manage patients with obesity, and one third reported that their medical school had no obesity education programme in place and no plans to develop one. So, despite the very high rates of obesity and the huge cost burden in the USA, medical schools are not yet prioritising obesity in their curricula (Butsch et al. 2020).

It appears that medical training on both sides of the Atlantic requires attention to ensure the next generation of doctors are competent at managing patients with obesity, but what about medics and other HCPs who are already practising? A large scale continuing professional development (CPD) programme is required in all disciplines to bring practitioners up to speed with best practice for obesity care. However, HCPs are generally overworked and have very limited time for CPD, so programmes need to be selective and effective, to train professionals in the knowledge and skills that are likely to have the most impact.

Sadly, since the Royal College of Physicians report highlighted the urgent need for training in obesity care, there have been no initiatives from the Department of Health to promote or fund such training. There is no requirement for health trusts or local authorities to train their staff in obesity care, so the level of obesity knowledge and expertise across the country is inconsistent at best. A 2015 report on UK HCPs estimated that fewer than 1% had received any specialised obesity training (Candesic 2015). One nationwide initiative that does encourage HCPs to start conversations

about weight with patients is Make Every Contact Count (MECC). MECC was launched in 2012 and aimed to empower HCPs to take every opportunity to raise the issue of health-related behaviours, such as smoking, diet, and physical activity, with their patients, to encourage them to make positive changes to improve their health. A MECC conversation simply aims to help people to think about changing their lifestyle by raising awareness of relevant issues, being encouraging and supportive of change, and signposting to further supporting agencies. There is evidence that, when applied by organisations on a large scale, it can make a difference to patient health at a local population level. MECC can be a positive step with regard to weight management as it can start conversations about lifestyle factors that affect patients' weight. However, the degree of training provided to support MECC is inconsistent (Lawrence et al. 2016), and does not deal specifically with weight or obesity, and therefore does not address some of the specific challenges of raising the issue of weight.

Indeed, a qualitative study published in the *BMJ* in 2015 (Blackburn et al. 2015) revealed that GPs and nurses were still reluctant to broach the topic of weight with patients due to: lack of knowledge and skills to deal with obesity; concerns about alienating patients; and the time constraints of a 10 minute consultation. The study concluded that addressing these concerns through training may lead to greater practitioner engagement and willingness to raise the topic. A good example of this was provided by the BWeL (Brief intervention for Weight Loss) trial, which showed that when the subject of weight is handled sensitively, and patients are offered a free weight management programme, they are often happy to talk about their weight and participate in the programme. The BWeL trial involved training GPs to opportunistically engage overweight and obese patients in a brief conversation about weight, with the aim of referring them to weight management services. The conversation could be as short as 30 seconds, but the results were impressive, leading to an increase in participation in weight management programmes, and an increase in the number of patients who successfully lost weight over the following 12 months (Aveyard et al. 2016).

So the evidence is out there that simple, targeted training programmes, supported by the availability of appropriate weight management services, can make a positive difference in the battle against obesity. This evidence has not been lost on the London Borough of Southwark in their attempts to tackle obesity in the Borough. Southwark has one of the highest rates of adult and childhood obesity in the country and has therefore launched a healthy weight strategy called Everybody's Business, which uses an evidence-based, life-course, whole-systems approach that includes both prevention and treatment services from maternity and early years through to older adults. Part of this strategy is the commissioning of obesity training programmes, not only for all healthcare professionals employed in the Borough but also for non-healthcare professionals who are public-facing. The courses are designed and delivered by the College of Contemporary Health, which specialises in online training courses in obesity care for HCPs. The courses provide training not only in the knowledge and understanding of obesity and the importance of sensitive communication and motivational skills but also explains how the Southwark Healthy

Weight Care and Referral Pathway works and which weight management services are available in the Borough.

The online nature of these courses means that they are accessible to all staff, no matter where or when they work, as long as they have internet access. Busy HCPs can study flexibly in their own time, or in work time if permitted, to complete the 5-hour course when it is most convenient for them—either intensively over a day or two, or extended over several weeks. E-learning is a rapidly growing educational medium that is suited to reaching large numbers of busy professionals for training and CPD and could therefore be key to delivering obesity care training to the army of HCPs confronted every day with the health consequences of excess weight.

While short courses of a few hours can educate HCPs with the basics of obesity knowledge and how to engage patients, more extensive training is required to train them to provide weight management advice in primary care. To achieve the RCP recommendation of a GP and nurse with a special interest in obesity in every general practice, training needs to be easily accessible for HCPs right across the country. Reading University offers a course for HCPs, to train them to be able to set up and deliver an effective weight management service in primary care. However, this is a 4-day attendance course delivered in Reading, so it is inaccessible for most HCPs. Online provision, on the other hand, is accessible to all HCPs. The RCGP offers an Introductory Certificate in Obesity, Malnutrition and Health, which could potentially be used to meet the obesity training need of large numbers of HCPs. It starts with six short online modules from SCOPE (Specialist Certification of Obesity Professional Education), but it also requires attendance at a communication skills training session. This is an improvement, as these attendance sessions can be delivered in different locations but still requires considerable time and organisation. On the other hand, courses that are delivered entirely online, and require no attendance, could potentially be used to meet the obesity training need of large numbers of HCPs. For example the College of Contemporary Health (CCH), in association with University of Central Lancashire Medical School, has developed postgraduate courses (PG Cert, PG Dip. and MSc) in Lifestyle Medicine (Obesity Care and Management). These courses provide HCPs with a deep understanding of obesity and the ability to improve and develop obesity care within their field of practice. For those practitioners looking for a less intensive learning experience and simply wish to update their knowledge, a range of accredited CPD short courses are available, including courses for nurses, personal trainers and HCPs working with children.

In an innovative, collaborative project, CCH has been working with London South Bank University, C3 Collaboration for Health and the Royal College of Nurses, as part of the Healthy Weight Initiative for Nurses (WIN), to address the issue of obesity in the nursing profession. The working environment of nurses provides barriers to adopting healthy behaviours, and therefore a high proportion of nurses have difficulty managing their weight (Kyle et al. 2017; Wills and Kelly 2017). This, of course, raises concerns about the health of our nurses, so it needs to be addressed, but it can also affect nurses' confidence in supporting patients with obesity and make patients less likely to follow their advice (Kelly et al. 2017). CCH

has developed a bespoke 10-h online course, Obesity Essentials for Nurses, to help nurses understand their own weight and thereby enhance skills transferrable to clinical practice to motivate patients towards weight loss. An initial pilot programme involving trainee nurses, as part of WIN, showed very promising results with regard to nurses' confidence in starting conversations about weight and giving up to date and personalised advice about obesity and weight management (C3 Health 2018).

The importance of reducing the prevalence of obesity in the general public, and in particular our nurses and other health professionals, has been highlighted by the recent coronavirus pandemic. Obesity is one of the major risk factors for Covid-19 severity and mortality, along with comorbidities of obesity such as type 2 diabetes and hypertension (Docherty et al. 2020). It is therefore important to re-double our efforts to tackle obesity, both to limit the impact of future pandemics and to reduce the incidence of type 2 diabetes, cardiovascular disease and other obesity-related health conditions. To achieve this, we must address the issue of obesity education for healthcare professionals, who come across patients with obesity on a daily basis but lack the knowledge and skills to provide the help and support these patients need. Obesity management should be prioritised in medical and nursing curricula, and training provided for existing HCPs to bring them up to date with best practices for obesity care. Targeted online training courses offer one way of providing this training and making it accessible and cost-effective for large numbers of practitioners.

References

- Aveyard P, Lewis A, Tearne S, Hood K, Christian-Brown A, Adab P, Begh R, Jolly K, Daley A, Farley A, Lycett D, Nickless A, Yu L, Retat L, Webber L, Pimpin L, Jebb SA. Screening and brief intervention for obesity in primary care: a parallel, two-arm, randomised trial. *Lancet*. 2016;388:2492–500.
- Blackburn M, Stathi A, Keogh E, Eccleston C. Raising the topic of weight in general practice: perspectives of GPs and primary care nurses. *BMJ Open*. 2015;5:e008546. <https://doi.org/10.1136/bmjopen-2015-008546>.
- Butsch WS, Kushner RF, Alford S, Gabriel Smolarz B. Low priority of obesity education leads to lack of medical students' preparedness to effectively treat patients with obesity: results from the U.S. medical school obesity education curriculum benchmark study. *BMC Med Educ*. 2020;20:23. <https://doi.org/10.1186/s12909-020-1925-z>.
- C3 Health. Healthy weight initiative for nurses final report. 2018. <https://www.c3health.org/blog/healthy-weight-initiative-nurses-final-report/c3-win-final-report-20180213/>
- Candesic. College of contemporary health: training market for obesity. 2015.
- Chisholm A, Mann K, Peters S, Hart J. Are medical educators following General Medical Council guidelines on obesity education: if not why not? *BMC Med Educ*. 2013;13:53. <https://doi.org/10.1186/1472-6920-13-53>.
- Docherty AB, Harrison EM, Green CA, et al. Features of 20,133 UK patients in hospital with covid-19 using the ISARIC WHO Clinical Characterisation Protocol: prospective observational cohort study. *BMJ*. 2020;369:m1985. <https://doi.org/10.1136/bmj.m1985>.
- Kelly M, Wills J, Sykes S. Do nurses' personal health behaviours impact on their health promotion practice? A systematic review. *Int J Nurs Stud*. 2017;76:62–77.

- Kushner RF, Horn DB, Butsch WS, et al. Development of obesity competencies for medical education: a report from the Obesity Medicine Education Collaborative. *Obesity* (Silver Spring). 2019;27(7):1063–7.
- Kyle RG, Wills J, Mahoney C, Coyle L, Kelly M, Atherton I. Obesity prevalence among healthcare professionals in England: a cross-sectional study using the Health Survey for England. *BMJ Open*. 2017;7:e018498. <https://doi.org/10.1136/bmjopen-2017-018498>.
- Lawrence W, Black C, Tinati T, Cradock S, Begum R, Jarman M, Pease A, Margetts B, Davies J, Inskip H, Cooper C, Baird J, Barker M. ‘Making every contact count’: Evaluation of the impact of an intervention to train health and social care practitioners in skills to support health behaviour change. *J Health Psychol*. 2016;21(2):138–51.
- Royal College of Physicians. The training of health professionals for the prevention and treatment of overweight and obesity. 2010. <https://www.rcplondon.ac.uk/file/268/download?token=B0d3Xh5b>
- Wills J, Kelly M. Investigating the attitudes of nurses who are obese. *Nurs Stand*. 2017;31(46):42–8.