

EXPLORING PRIMARY CARE PROVIDERS' PRACTICES AND PERCEPTIONS REGARDING IMPLEMENTATION OF PEDIATRIC OBESITY MANAGEMENT

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Prevalence and Impact of Childhood Obesity:

- Childhood obesity is a significant public health concern, with prevalence rates of 19.7%, affecting approximately 14.7 million children,¹ indicating a pressing need for effective interventions.
- The condition is associated with severe health implications, including cardiovascular disease, cancer, and type 2 diabetes, leading to substantial economic burdens on the healthcare system.²

Role of Motivational Interviewing in Pediatric Obesity Management:

- Motivational Interviewing (MI) emerges as a pivotal approach recommended by the American Academy of Pediatrics (AAP) for addressing pediatric obesity.³
- MI emphasizes a patient-centered counseling method aimed at enhancing intrinsic motivation for behavior change, aligning with the individual values and capabilities of patients and families.³

Multidisciplinary Action:

- Primary care providers play a crucial role in implementing motivational interviewing, as recommended by the AAP, and are instrumental in addressing pediatric obesity effectively in practice.⁴⁻⁹
- Interventions combining MI-based counseling from both primary care providers and RDNs show promising results in reducing BMI percentiles and promoting behavior change among children and their families.⁴⁻⁹

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OBJECTIVE

Our objective is to investigate primary care providers' approaches to addressing child obesity, identifying challenges faced and preferred support resources utilized as a first step towards enhancing interventions.

METHODOLOGY

RESEARCH METHODS

- Anonymous online pilot survey of pediatric primary care providers utilizing Qualtrics platform.
- Draft survey reviewed by content experts and revised based on feedback.

SITE & PARTICIPANT INFORMATION:

- Target audience: Pediatric primary care providers including physicians, physician assistants (PA), or nurse practitioners (NP).
- Site: Cherokee Health Systems clinics in the great Knoxville area.

RECRUITMENT:

- Attained approval for recruiting in the clinics through the UTK-CHS REACCH collaborative.
- The Director of Behavioral Health Education and Training directed the recruiting email and survey link to the Medical Director for distribution to providers.
- Direct Contact Methods: Email

INCLUSION CRITERIA:

- Desired Sample Size: 25 responses
- Age: 25-75 years
- No racial/ethnic groups excluded
- Primary Care Providers at Cherokee Health Systems (Alcoa & Cherokee Mills locations)

This project was approved by the University of Tennessee, Knoxville, Institutional Review Board, approval UTK IRB-24-08136-XM

ETHICS & LIMITATIONS

As primary care providers; services are in high demand. Providers must prioritize the care of their patients above all. Therefore, there was a limited number of survey responses to provide significant research data. This experience has been enlightening, revealing the challenges associated with reaching out to primary care physicians and their significant workload demands.

Ethical considerations for research were approved through the Institutional Review Board of the University of Tennessee, Knoxville. All responses and research participants were to remain anonymous. With only approved researchers having access to research data.

RESULTS & DISCUSSION

- The study remains ongoing, although we have experienced delays in acquiring results due to challenges in engaging primary care providers (PCPs), who are understandably occupied with their clinical responsibilities. We are actively working to obtain responses and proceed with data analysis. We anticipate future research opportunities to explore this topic further and hope for increased participation from primary care physicians.
- Low-intensity motivational interviewing interventions conducted by healthcare providers have demonstrated significant promise in improving weight status among children, as evidenced by reduced BMI percentile or z-score increase.³
- Taking collaborative training with the interdisciplinary staff in motivational interviewing enhances the effectiveness of pediatric obesity interventions by improving communication among team members, and ensuring a coordinated care plan for patients and their families.⁷⁻⁸
- Simulation role play could benefit primary care providers in understanding and applying motivational interviewing guidelines for pediatric obesity interventions by providing hands-on practice, immediate feedback, and confidence-building in navigating real-life scenarios.

FUTURE RESEARCH & CLINICAL RELEVANCE

Interventions in the future should focus on increasing MI training for primary care providers to optimize their role in addressing pediatric obesity. MI as an intervention can promote the success of long-term lifestyle changes for pediatric patients. Future research is needed to prove the long-term implications of positive use of MI by primary care providers in relation to childhood obesity. Efforts should be made to identify the most effective strategies for reaching primary care providers (PCPs) and providing them with resources that enhance their capacity to integrate MI into their practice effectively. Further research can support future MI methods, tactics, and overall success of this intervention techniques in all areas of practice.

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