Department of Health Reviews Facility

To support national policy development and implementation



Evidence Summary

What are the critical features of successful weight management programmes for adults?

- Obesity is a major public health problem.
 In 2014, 58% of women and 65% of men in England were overweight or obese.
- Weight management programmes (WMPs) that target diet and exercise can reduce weight in adults who are overweight or obese.
- Research evidence suggests that particular features of WMPs may be vital to their success.
- More effective programmes foster supportive relationships with providers or with peers and encourage maintenance of a healthy lifestyle.
- Supportive relationships are seen as critical in the early stages of a WMP as they encourage people to attend sessions and follow the healthy eating and exercise advice given.
- Maintaining a healthy lifestyle is felt to depend on having opportunities to exercise and experiencing the associated health and fitness benefits.

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Evidence Summary

This summary is based on a systematic review of WMPs for adults. Our main aim is to highlight the features of successful weight loss programmes.

- From UK based studies we examined the views of people who had used or delivered WMPs. From this evidence we identified the features of WMPs that are *perceived* to be key to weight loss.
- From an analysis of service evaluations we assessed whether features perceived to be important are actually associated with greater weight loss. We examined the presence or absence of identified features from randomised controlled trials (RCTs) of WMPs and compared the ten most effective with the ten least effective.

 To ensure the evidence can be used in practice we explored current weight management provision with local authorities and considered how the review findings could be incorporated into future provision of services.

Evidence Sources

Studies of service user and provider views: 26

Service evaluations: 20

Interviews with local authorities: 2

Details of the project are presented in the full report at http://eppi.ioe.ac.uk/cms/Default. aspx?tabid=3675

Background

Obesity is a major public health problem. In 2014, 58% of women and 65% of men in England were overweight or obese (Health & Social Care Information Centre, 2016). The UK has one of the highest rates of obesity in the developed world (Ng et al., 2014).

In the UK, we have robust but 'broad brush' guidance on 'what works?' to promote weight management among adults. However, WMPs are complex interventions and attempts to explain why some programmes are more effective than others have been unsuccessful. Without an understanding of the features associated with weight loss local authorities find it difficult to commission and deliver effective programmes.

The aim of this research project was to identify the critical features of WMPs for adults.

Findings

Which aspects of WMPs are perceived as important for achieving weight loss?

Supportive relationships with WMP providers were perceived as the most critical feature for success.

- Support from providers was a key motivator, e.g. "You feel that somebody's batting for you".
- Direction and guidance from providers was important, e.g. "I need someone to take my hand and take me over".
- Being in a group with others "in the same boat" was also highly valued, e.g. the "friendly atmosphere and team motivation I found worked quite well".
- Being with similar others was valued, e.g.
 "we all had something in common with each
 other ... so no matter... you didn't know each
 other's names, we immediately were able to
 converse with each other easily".

How are supportive relationships perceived to lead to weight loss?

Supportive relationships were fundamental to three important facilitators of weight loss: attendance at WMP sessions, initial adoption of a healthier lifestyle and maintaining a healthy lifestyle.

- Supportive relationships led to the development of 'social bonds' which encouraged people to return for further WMP sessions, e.g. "You wanted to come back and hear how the guys were getting on".
- Social bonds created a sense of accountability that motivated people to stick to the advised healthy eating and exercise plans, e.g. "you didn't want to let the team down".
- In turn, adoption of a healthier lifestyle led to increased confidence in being healthy and experiencing associated benefits, e.g. "I've seen my blood pressure go down and I've seen my fitness levels go up". "'It's got me going back to the gym and stuff like that, on top of the walking".

Are the features perceived to be important associated with weight loss?

The WMP features identified as important by service users and providers were associated with greater weight loss.

The most effective WMPs:-

- (A) Fostered supportive relationships with providers and encouraged maintenance of a healthy lifestyle. Maintenance was encouraged by either
 - providing exercise sessions or
 - gradually decreasing the frequency of WMP sessions.

If either supportive relationships or encouragement of maintenance (or both) did not feature in a WMP it was less effective.

(B) Involved high levels of direction from providers, again in conjunction with efforts to encourage maintenance. Provider direction included setting goals for calorie intake and exercise. Absence of direction from providers on either calorie intake or exercise goals was consistently associated with reduced effectiveness.

(C) Encouraged peer support

- by using a group delivery approach (rather than delivery to individuals) and
- by targeting particular types of people such as men or ethnic minority groups (i.e. developing relationships is easier as they have more in common with one another).

The evidence on peer support was less clear than for provider support. Some WMPs with either a group delivery approach or targeting of particular types of people achieved greater weight loss. However, all WMPs with both features were more effective, and all WMPs with neither feature were less effective.

Local authority experiences with WMPs

Providers and commissioners in local authorities welcomed guidance about the critical features of WMPs. Their own experiences aligned with the findings of the review regarding the importance of supportive relationships between providers and users. Flexible service provision in order to meet the needs and preferences of service users also emerged as a strong and important theme.

Implications for practice

- WMPs should encourage strong provider-user and user-peer relationships.
- Commissioning briefs should specify that time and resources are needed to develop supportive relationships and that providers need to have excellent interpersonal skills.
- Providers should give guidance about energy intake and expenditure in the context of a supportive relationship.
- In order to encourage maintenance of a healthy lifestyle WMPs should include physical activity sessions and involve a 'graduated exit' offering light-touch support after the typical 12-week programme.

Research priorities

- Collaborative research between academic institutions and local authorities to ensure the relevance and utility of evidence for UK decision-makers.
- Evaluations of the kinds of services currently being provided by local authorities in the UK.
- Evaluations of interventions targeting different minority ethnic groups, those with learning disabilities or people with mental health problems.

References

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