A descriptive study: Weight management practices of members of a professional nurses association trying to lose weight

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Obesity has reached pandemic levels. A critical challenge today is improving the health behaviors of those providing care to the general public. Nurses as health promoters & role models of healthy lifestyles are in a unique position to combat this global problem. This descriptive quantitative study sought to describe the weight management practices of members of a professional nursing association who were trying to lose weight. Questions were adapted from the behavioral risk factor surveillance survey. In addition, the Health Styles survey was used along with one additionally inserted question. Twenty percent of the nurses' loss weight, average change in weight +2.88 pounds (SD=7.67), maximum individual weight loss -21.50 pounds. Weight loss was greatest during consecutively held meeting and non-holiday seasons. ANOVA revealed no significant differences in weight change among normal weight, overweight & obese participants after the peer-led interventions (F (2.26) =0.402, p=0.673. Pearson Product Moment analysis revealed a moderate, but statistically significant correlation between the numbers of meetings attended by the participant & weight loss (r=-0.370, p=0.044). A small percentage of the nurses moved from the obese classification into the overweight status, thereby improving their health. Over 60% attempted to lose weight by combining dietary & exercise strategies. Thirteen percent met the recommended guidelines of the American College of Sports Medicine (ACSM) 60-90 minutes of physical activity guidelines to lose weight.

Primary care practice based research and learning –Global experience

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Compared with other health care settings, primary care is unique in the breadth of its scope, being concerned with a range of patient health issues and human needs. Primary care providers respond to physical and emotional health concerns of diverse populations, providing and coordinating care across the lifespan. Many patients present with multiple health concerns and other psychosocial, family, or cultural issues requiring attention. This broad scope of practice contrasts with what some see as the highly specialized nature of medical and intervention research driven by a focus on single, tightly defined diseases or clinical situations. The clinical practice guidelines and educational programs are often developed with single diseases in mind and sometimes overlook socioeconomic and cultural differences in populations. This disconnects forces primary care providers to assess the applicability of research findings and interventions to the “real-world” patients in their own practice settings. This study focusses on the factors important to close the gaps to enable primary care and advanced care to be integrated through a research platform to generate better outcomes for patients.