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Conference Abstract

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Abstract format

(350 word limit excluding title and author details; Submit by November 27, 2015)

Title: Psychosocial Interventions in the Management of Severe Adolescent Obesity

Authors: Sharman, K., Radley, D., Dimitri, P. & Nobles, J.

Purpose: Psychosocial Interventions (PSI) are commonly utilised in mental health management, and to our knowledge, have not been explicitly used in weight management. PSI are characterised by three distinct phases: 1) an initial in-depth assessment; 2) an intensive group intervention to stabilise the condition (in this instance weight gain); and 3) an intensive group maintenance programme. PSI focus on the psychosocial elements of obesity, including: stress management, body dysmorphia and self-esteem. As such, the PSI approach is more holistic than traditional weight management approaches. This paper evaluated the outcomes of a PSI when delivered under service level conditions.

Methods: SHINE (Self-Help, Independence, Nutrition, and Exercise) is a community-based weight management programme that implements a PSI approach. The programme is located in Sheffield, UK. Adolescents ($n = 393$) with severe obesity signed onto the programme between 2011 and 2013. The programme spans 12-15 months and participants attend three phases of the PSI. Phase One is undertaken before the programme, Phase Two is a 12-week intervention and Phase Three is split into three 12-week maintenance interventions. Anthropometric measurements (BMI and WC) were collected at baseline, 3-, 6-, 9- and 12-months. Psychosocial measures (self-esteem, anxiety and depression) were collected at baseline and 3-months. Participant retention was also assessed.

Results: 304 participants started the programme and 289 were retained at 3 months. At 3 months BMI z-score reduced by 0.21 (95% CI: 0.19, 0.24) and WC by 7.8cm (95% CI: 7.2, 8.5). Almost 25% of participants reduced their BMI classification (e.g. severely obese to obese). Anxiety and self-esteem improved by 63% and 50% respectively. 89 participants continued to attend the programme after 12 months, obtaining a BMI z-score reduction of 0.46 (95% CI: 0.35, 0.58) and a WC reduction of 10.5cm (95% CI: 7.8, 13.1).

Conclusions: Obesity is a highly complex condition to manage and requires intensive and prolonged support to produce meaningful and lasting behavioural and anthropometric changes. The SHINE PSI approach has shown promise and demonstrated encouraging results - suggesting that it may be beneficial for interventions to consider wider determinants of health and wellbeing beyond simply diet and physical activity.