KEY MESSAGES

Weight management for patients in general practice tailored to health literacy

21 July 2016

Harris M1, Faruqi N1, Stocks N2, Spooner C1, Hermiz O1, El-Haddad N1, Liaw ST1, Lloyd J1, Lymer S3, Caterson I3.

1 Centre for Primary Health Care and Equity, UNSW Australia; 2 University of Adelaide; 3 University of Sydney.

Policy context

Obesity rates have increased in Australia and present a significant health challenge, particularly for people from low socio-economic communities and people with low health literacy. General practices have an important role to play in helping obese patients to manage their weight. The NHMRC guidelines for the management of overweight and obesity use the 5As model to guide practice: Ask, Assess, Advise, Assist, and Arrange. However, significant barriers exist to the implementation of Advice Assist (referral) and Arrange (follow-up). Barriers include the complexity of information involved in weight management and the level of patient’s health literacy required to deal with this. A program of research was conducted to evaluate the feasibility and impact of a primary health care approach to weight management for obese patients tailored to their level of health literacy.

Key messages

Strategies recommended at Primary Health Network level:

- Training is needed for practice nurses (PNs) and general practitioners (GPs) in identifying and better supporting obese patients with low health literacy to manage their weight across the 5As. It is needed in particular to:
  - identify obese patients with low health literacy and differentiate low health literacy from low motivation;
  - tailor advice and education to their health literacy while not stigmatising patients; and
  - support patient navigation to evidence-based referral programs.

- Simplified referral pathways for obese patients with low health literacy need to be developed.

Strategies recommended at national and state government levels:

- Readily available patient education materials on weight management that are appropriate for patients with low health literacy and for different language groups are required.

- A funding model that supports GPs in being more proactive in the identification and support of obese patients with low health literacy is needed.

- Training and remuneration of PNs is needed for the time spent tailoring advice and education for obese patients with low health literacy and providing them with navigation support to attend referral programs.

The research reported in this paper is a project of the Australian Primary Health Care Research Institute, supported by a grant from the Australian Government Department of Health under the Primary Health Care Research, Evaluation and Development Strategy. The information and opinions contained in it do not necessarily reflect the views or policies of the Australian Government Department of Health.