

**Nutrition and Medicine, 2006**  
**Tufts University School of Medicine**  
**Behavioral Skills:**  
**Learning Objectives**

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1. Identify the medical conditions in which a lifestyle change in diet and exercise would reduce risk or progression of disease.
2. Describe the skills that a physician needs to help his/her patients succeed in making lifestyle changes in diet and exercise.
3. Describe the skills that a patient needs to increase their chances of being successful in making a lifestyle change in diet and exercise.
4. Identify the behaviors that are reported by “successful dieters” (those who have lost and maintained their weight loss for 5 years).
5. Explain aspects of our culture that impact our current dietary patterns.

## **Behavioral Skills:** Answers to Learning Objectives

### **1. Identify the medical conditions in which a lifestyle change in diet and exercise would reduce risk or progression of disease.**

- Increased mortality
- Diabetes
- Dyslipidemia
- Coronary heart disease
- Congestive heart failure
- Hypertension
- Cancer
- Osteoarthritis
- Sleep apnea
- Gallbladder disease
- Osteoporosis

### **2. Describe the skills that a physician needs to help his/her patients succeed in making lifestyle changes in diet and exercise.**

- Use a “patient-centered” counseling approach. Let the patient lead in determining which lifestyle changes he or she can make.
- Assess patient’s “readiness to change.” If your patients are not ready to make a change, you need to be sensitive to this and adjust your approach.
- Use open-ended questions and LISTEN. This will help you identify the patient’s concerns and possible motivators.
- Show empathy and a “connection” with the patient.
- Encourage the patient to develop personal “pros” and “cons” of making a lifestyle change. If the “pros” outweigh the “cons,” the patient may be ready for preparation and action. Some of the “cons” may be based on unrealistic fears that you can identify and dispel.
- Identify the patient’s personal “barriers to change.” Every patient has day to day barriers, whether it’s time, money, lack of cooking expertise, etc. Offering the patient solutions specific to his/her individual barriers will empower the patient to succeed.
- Identify the patient’s social support network. Reinforce or refer, as necessary.
- Clarify the patient’s understanding of his/her treatment plan. Have the patient summarize the treatment plan and his/her understanding of the plan before leaving your office. This will help identify whether the patient truly understands what he/she is supposed to do.

**3. Describe the skills that a patient needs to increase their chances of being successful in making a lifestyle change in diet and exercise.**

- Self-monitor the changes being made (keeping food records, exercise logs, checking weight, etc.).
- Develop alternative rewards other than food.
- Seek and receive social support. This is so important. Many people prefer to exercise with a partner or group of friends. It is easier to change your diet if others in your family are supportive.
- Develop a positive attitude for ongoing encouragement and self-support. Believe that you can do it, and encourage yourself when you do.
- Develop a plan to recover from relapse, i.e., an “insurance” menu to follow after a meal too high in fat or calories, or an exercise plan to get you back on track.
- Plan ahead. Plan meals or weekly menus before you go to the grocery store. Decide what foods you’ll choose before you go to a restaurant or special event. High risk situations happen all the time – office parties, a night out for dinner or a movie, weddings, holidays. Planning ahead will get you through these events without overeating, gaining weight, etc.

**4. Identify the behaviors that are reported by people successful at losing weight (those who have lost and maintained their weight loss for 5 years).**

According to the National Weight Control Registry, a database of people successful at maintaining weight loss for 5 years, the following behaviors were reported:

- About 50% of participants lost weight on their own, without any type of formal program or help.
- Most participants followed a regimented program that included a low fat diet and almost daily, vigorous exercise.
- Most participants reported decreasing calories to approximately 1400 kcal per day.
- Most participants reported decreasing fat to approximately 24% of calories.
- Most participants reported engaging in regular exercise to expend approximately 2500 kcal per week, or about 350 kcal per day.

**5. Explain aspects of our culture that impact our current dietary patterns.**

- Americans have access to a wide variety of food anywhere, at any time, including tens of thousands of fast food restaurants, 24-hour convenience stores, “super” grocery stores, gourmet restaurants, vending machines, etc.
- Each year the food industry develops tens of thousands of new food products, all processed, most with little nutritional value. For example, in an average grocery store, there are entire aisles devoted to sweetened breakfast cereals, cookies, pasta dishes, frozen dessert items, snack items, sweetened carbonated beverages, etc.
- The food industry spends hundreds of millions of dollars each year on advertising and marketing to influence how Americans eat.
- The average American family eats away from home (at restaurants or take-out) five times a week. Twenty five years ago, the frequency was twice a month.
- Average portion sizes in restaurants are as much as 3-5 times the recommended portion sizes.
- Most foods/meals purchased in restaurants are high in fat, sugar, and/or starch.
- The amount of time Americans spend in physical activity and exercise has declined over the past decades. This is particularly true among children, who today spend hours in front of the television and computer.