Managing health literacy for weight loss in primary health care

Very low health literacy affects 20% of the Australian population and is a barrier to the uptake and effectiveness of lifestyle interventions. ABS 2006.

GP intentions to refer

- I want lots of people with a BMI over 30 to go somewhere, but most are not really interested or motivated to change [Rural GP #1]
- ...they may or may not put changes in place. But again, motivation is probably the biggest issue there." [Urban GP #7]

Aims

To evaluate the reported assessment and management of patients with obesity and low health literacy in their practice by general practitioners (GPs) and practice nurses (PNs).
Participants

- 61 participants: 37 GPs and 24 PNs from 20 practices in disadvantaged areas in Sydney and Adelaide

5As of preventive care

- Assess risk and motivation, health literacy
- Advise/Agree
- Assist
- Arrange
- Follow up

Frequency of actions across the 5As

Confidence in assessment and management of obesity

Proportion tailoring their approach to health literacy often or >60% of the time

Barriers to management of obesity in patients with low health literacy
Conclusions

- Interventions to improve the assessment, advice, goal setting, referral and follow up of patients with obesity and low health literacy need to address negative previous experience with weight loss and low use of techniques to enhance communication and enhance referral navigation.

Some Potential Policy Implications

1. Role of Primary Health Networks in commissioning services and programs and facilitating quality improvement.
2. Targeting weight loss programs according to risk and health literacy.
3. Better integration between lifestyle and specialist obesity services (including surgery).
4. Adapting existing PHC payment systems to support the role of PNs in obesity management and facilitate integrated referral pathways.

Publications