The obesity epidemic is getting more and more publicity. As we watch the current numbers of those affected by obesity rise, the question still remains: What are we doing, that is working, to alleviate this epidemic?

We know that two-thirds of the population is affected by overweight or obesity. Because of that, we know that effective treatment programs are just as necessary as effective prevention programs. What we are still trying to determine is what works for successful long-term treatment and how to find out about it if you need it.

A new research study is currently in publication in the *Journal of Consulting and Clinical Psychology*. In this study, a few questions are examined.

1. First, what do current experts consider effective treatment for childhood obesity?

2. Second, what happens when healthcare providers follow expert guidelines when recommending treatment to families?

3. Third, who do parents seek advice from when they have a child affected by obesity? Let’s look at these questions.

What we know, based on the most current research, is that parents most often look to their healthcare provider or primary care physician (PCP) first when seeking advice for how to treat their child struggling with excess weight or obesity. It is the expectation of the parents that the PCP will know how to treat this problem since it can be considered a medical condition. However, the tricky part here is that not all physicians are properly trained in weight management. In fact, the majority do not...
have specific training in this area. Therefore, doctors are seeking advice from experts in the field on how to deal with this issue. We do know, however, that when doctors get the proper training and feel well-equipped to give advice, they are much more likely to do so.

**PCP Advice**

Research shows the most effective advice for parents and caregivers comes in the form of clear, simple, goal-oriented directions. Essentially what this means is that the more comfortable the PCP is with the topic, the better and more effective advice they are able to give to their patients. Proper training for healthcare providers is essential to make them more comfortable giving weight-related advice. Furthermore, when parents get a recommendation from their PCP, they are more apt to listen and to seek treatment. If more healthcare providers are seeking the proper knowledge about treating childhood obesity, therefore giving better recommendations to parents, throughout time we can change the trajectory of weight gain.

**Cognitive Behavioral Therapy**

If we know that when healthcare providers offer recommendations to parents they are more likely to pay attention to the problem of childhood obesity, then we must prioritize healthcare providers getting access to the best information about effective treatment options. Five expert groups were brought together to answer this question. All groups were researching independently of one another throughout the last eight years. Each group came up with slightly different findings; however, they all had one recommendation in common. Cognitive Behavioral Therapy (CBT) stands out as the gold standard for weight management and behavior change today.

To take that one step further, Intensive or Immersive CBT is what works best for long-term outcomes. Keep in mind this recommendation is for treatment of excess weight and obesity. Intensive is defined as at least 24 weekly sessions of CBT for a period of at least six months. Immersion is defined as a full-immersion program where the patient is in treatment 24-hours-a-day.

You might be saying to yourself, “This is a lot! I can’t afford to send my child to a treatment program. I don’t want to send my child to a treatment program. I don’t think my child needs that much treatment.” These are all understandable concerns. This is why a number of the expert groups are recommending what is called a “Step-up Approach.” We know that obesity will not just go away on its own, some type of intervention is needed, but we also know that kids are in various stages of their journey toward health.

**Step-up Approach**

Experts are recommending that healthcare providers offer families a step-up approach. In this approach, the goal is that parents will first start with the lowest intensity of interventions. If that intervention does not alleviate the problem within a six month period, the family would move to the next level of intensity. The idea is that the family would not stop increasing the intensity of the intervention until the problem is alleviated.

An example of a step-up approach is the 7-step model proposed by Daniel Kirschenbaum, PhD. In this model, the healthcare provider acts as the “quarterback” of the family team; recommending various interventions until the problem is solved. See the chart below for the 7 Steps of Interventions:

### 7 Steps of Interventions

1. **Medical Management** – doctors provide feedback about progress and regular evaluations
2. **Education** – education in the form of self-help books and other materials
3. **Environmental Changes** – join a health club; take television and computers out of bedrooms, more intense focus on activity
4. **Self-Help Groups** – groups in your area such as Weight Watchers, Wellspring Journey or TOPS allowing you to connect with others suffering from the same challenges
5. **Outpatient CBT** – checking in with a therapist specializing in CBT and/or weight management
6. **Immersion CBT** – residential program that removes obesogenic culture and intensifies the process through modeling, CBT and other intensive interventions
7. **Bariatric Surgery** – final stage, appropriate for some
Conclusion

We know that something needs to be done about the epidemic we are facing. But with all of the information and gimmicks for weight-loss out there, it can be hard to determine what is right for your child, family member or yourself. As research continues to emerge about the most effective forms of treatment, it is imperative that healthcare providers stay current on the interventions that work. It is also imperative that parents stay active in their search for a healthy action plan for their child.

Overweight and obesity are not problems that kids are “growing out of” like we used to believe. Effective treatment takes a more involved and committed approach. I urge every parent to continue staying focused on increasingly intensive interventions until the problem is solved.

About the Author:

Eliza Kingsford, MA, LPC, is a licensed psychotherapist specializing in weight management, eating disorders and body image. She is Director of Clinical Services for Wellspring, a division of CRC Health Group. As Clinical Director for Wellspring, Eliza works with participants’ ages five and up, providing weight management solutions throughout the lifespan. As a member of the OAC, Eliza is passionate about changing health reform to include better treatment options for obesity. Eliza is a member of the California Association of Licensed Professional Clinical Counselors and the American Psychological Association.

What to do next:

- Talk to your healthcare provider if your child is even overweight. Ask your healthcare provider if they have any training in the area of weight management.
- If your child has a BMI of 25 or greater they are in the overweight category. This is not a hard and fast science but is good enough evidence to start paying attention to changing the direction of the problem.
- Ask your healthcare provider if they have any references of people who specialize in the treatment of overweight and/or obesity, and call those references for more information.
- Make a commitment to not stop increasing the intensity of your interventions until the problem is alleviated.
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