

Healthy Weight Program Evaluation

SUMMARY REPORT 1996–1999



Queensland Health's Healthy Weight Program is a community based weight and waist management and healthy lifestyle program designed for Aboriginal and Torres Strait Islander adults. The program consists of a series of workshops and individual assessments (or screenings) conducted by trained facilitators over a period of eight months. The program promotes a lifestyle of good nutrition and physical activity. It also teaches skills such as food label reading, low fat cooking and budgeting.

The program uses a set of visual resources including A2-size laminated workshop flipcharts, fat in food photos, plastic food models, laminated activity cards and a facilitator's manual.

The program was evaluated throughout Queensland in 1999. This evaluation was conducted in two parts:

- **interviews with facilitators using a questionnaire**
- **analysis of participants screening data.**

GOAL OF THIS EVALUATION

The goal was to evaluate the Healthy Weight Program and develop strategies to support the program at a local level.

The major purposes of conducting the evaluation were to:

- measure how well the Healthy Weight Program is working for both participants and facilitators
- identify possible barriers to implementing the Healthy Weight Program
- develop strategies to assist facilitators to improve program delivery
- plan for adapting the program content and approach, if indicated.

RESULTS

Facilitators

At the time of the evaluation there were fifty-nine facilitators in Queensland. Fifty-four took part in the evaluation. Most facilitators were generalist Aboriginal and Torres Strait Islander Health Workers. Most reported attending the training so that they could improve their nutrition knowledge and skills.

Facilitators also used the Healthy Weight Program resources for other work, such as diabetes education, nutrition work in schools, and individual counselling for overweight people and newly diagnosed diabetics.

Facilitators were asked to specify the barriers that they had encountered, if any, when running the program. The most common problems were:

- lack of time to organise and facilitate the program
- lack of support from others to run sessions
- lack of participation when the workshops were completed and the monthly screenings started.



Participants

Facilitators collected screening data from 260 participants – 218 females and 41 males. One person's gender was not recorded. Of these, only 91 people had measurements recorded at the first and the third screening:

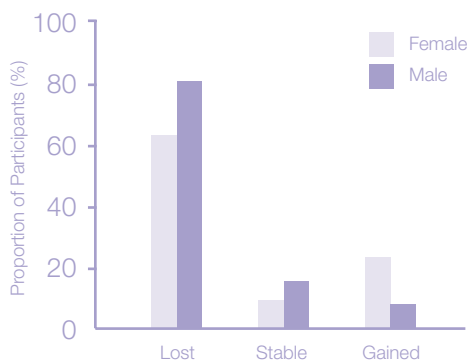


Figure 1 Weight change in Healthy Weight Program participants (n=91) who continued for at least 8 weeks of the program

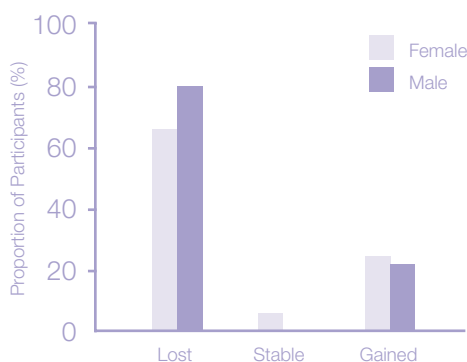


Figure 2 Waist change in Healthy Weight Program participants (n=91) who continued for at least 8 weeks of the program

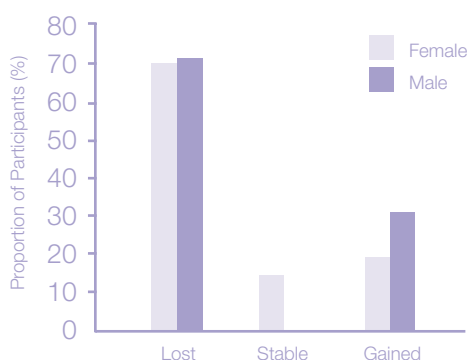


Figure 3 Hip change in Healthy Weight Program participants (n=91) who continued for at least 8 weeks of the Program

In summary

- **Weight Change**
62 participants lost weight, 20 gained and 9 remained stable
- **Waist Change**
64 lost, 20 gained and 7 remained stable
- **Hip Change**
65 lost, 16 gained and 10 remained stable

Overall the Healthy Weight Program was effective for participants who continued the program for at least eight weeks. In addition, facilitators found the program resources to be very useful for many aspects of their work and the training improved their nutrition skills and knowledge.

RECOMMENDATIONS

- 1 Long-term evaluation mechanisms need to be developed.
- 2 Long-term evaluation information needs to be obtained on behavioural changes made by participants. These may include physical activity, fruit and vegetable intake, and cooking methods used.
- 3 Ongoing support mechanisms for Healthy Weight Program facilitators are needed at a local level.
- 4 Support at the Health Service District level is required for the sustainability of the program.
- 5 Support is also needed at a Public Health Unit Network level in terms of a newsletter and zonal contact person.
- 6 Facilitator training should be offered widely to include people other than Aboriginal and Torres Strait Islander Health Workers.
- 7 Effort should be made to increase the number of male facilitators and participants.
- 8 Additional Healthy Weight Program resources need to be developed.
- 9 Regular training updates for facilitators need to be provided.
- 10 Facilitators need to be encouraged to deliver the program in a more flexible way to suit the local



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