

STOP STRATEGIES TO OVERCOME & PREVENT OBESITY ALLIANCE

2020 Annual Report

Milken Institute School
of Public Health

THE GEORGE WASHINGTON UNIVERSITY

Sumner M. Redstone
Global Center for
Prevention & Wellness

The Strategies to Overcome and Prevent (STOP) Obesity Alliance comprises a diverse group of business, consumer, government, advocacy, and health organizations dedicated to reversing the obesity epidemic in the United States. Drawing on the strengths of the collaborative, the Alliance conducts research, makes policy recommendations, and develops hands-on tools for providers, advocacy groups, policymakers and consumers.

The goals of the STOP Obesity Alliance are to address obesity and related conditions by:

- Leading innovation
- Strengthening systems of care for patients with overweight and obesity
- Convening diverse stakeholders to address issues related to the care of patients with overweight and obesity
- Defining and catalyzing an innovative research agenda for the care of patients with overweight and obesity
- Identifying, implementing, and evaluating strategies to increase physical activity for patients with obesity
- Reducing stigma to improve health outcomes

Leadership

The Redstone Global Center for Prevention and Wellness at the Milken Institute School of Public Health serves as the academic home of the STOP Obesity Alliance (the Alliance). Situated in the only school of public health in our nation's capital, the Redstone Global Center is ideally positioned to convene key stakeholders and determine strategies to translate public health science into effective policy.

The Alliance is directed by William H. Dietz, M.D., Ph.D., Chair of the Redstone Global Center. Scott Kahan, M.D., M.P.H., serves as the Medical Director. Christine Gallagher, MPAff, manages the Alliance. Amelia Corl and Samuel Hughes provide research support. The Alliance is also supported by Redstone Global Center staff, including Jeff Hild, J.D., Policy Director, and Kate Wolff, M.P.A., Communications Director.

New Perspective: Solving Population-wide Obesity



In the December 2020 issue of the *New England Journal of Medicine*, Redstone Global Center director Bill Dietz joins Dr. Shiriki Kumanyika for a submission to the journal's series commemorating the 50th anniversary of the National Academy of Medicine. The Dietz and Kumanyika piece focuses on progress and opportunities for addressing the obesity pandemic. The authors assert that "it will be necessary to reimagine and reengineer systems that define modern life and to move away from the contexts that people often take for granted: an overabundance and the normative overconsumption of highly palatable processed and high-calorie convenience foods, motorized transportation, sedentary work and learning environments and entertainment, and companies whose profits depend on perpetuating these circumstances in both the general and highest-risk populations."

Read the full article at:

nejm.org/doi/full/10.1056/NEJMp2029646



Membership

Alliance members include more than 60 consumer, provider, government, business, health insurance, advocacy and quality-of-care organizations. Essential to the success of the Alliance is its active and diverse coalition. Since its launch in 2007, the Alliance has focused on collaborative member relationships to achieve shared goals and capitalize on partnership opportunities. The Alliance's Steering Committee is composed of leading public and private sector organizations selected for their expertise in areas related to obesity, chronic disease, and health care. (Please see Appendix A for a list of the Steering Committee members.) The Alliance's broad membership includes national associations, state-level members, and individuals that contribute to the Alliance's discussions and convenings. Collaborative work focuses on developing clinical strategies and consumer materials that improve obesity care, support effective prevention, and reduce bias and stigma. (Please see Appendix B for a list of the Associate members in 2020.)



Funding

In 2020, corporate members included Novo Nordisk and WW, who contributed a total of \$105,000. The Alliance is also supported through membership fees of its nonprofit members. In 2020, eight members each contributed a \$2,000 annual membership fee for a total of \$16,000. In 2020 corporate and membership fees yielded \$121,000 in funds to support our work. We received an additional \$144,381 in sponsored research project funding from Novo Nordisk for an 18-month grant to develop a guide for primary care obesity management.



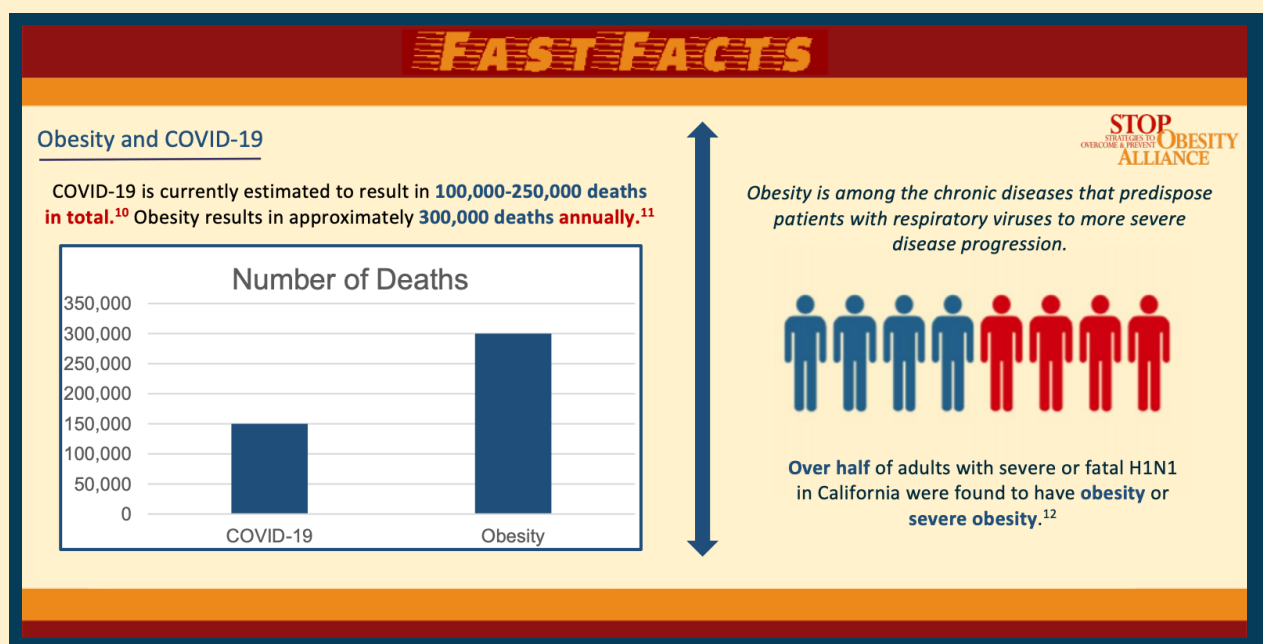
How We're Making a Difference

In 2020, the Alliance continued to conduct and publish research to guide health care providers, policymakers, payers and health care experts towards the effective treatment of obesity.

COVID-19 and Obesity

Since March 2020, Alliance leadership has authored commentaries, blogs and new infographics to help highlight the connections between systemic inequities, chronic health disparities and the COVID-19 pandemic. A commentary by Dr. Dietz and Milken Institute School of Public Health global health professor Dr. Carlos Santos-Burgoa, [published in Obesity on April 1, 2020](#), was one of the first major publications drawing attention to the possibility that COVID-19 could have serious adverse effects for patients with obesity. The Alliance also published two new Fast Fact Sheets on [Obesity and COVID-19](#) and on [COVID-19, Obesity, and Food Systems](#). Since April, Dr. Dietz has continued to speak nationally and internationally on the topic, including at webinars hosted by the World Obesity Federation, the Global Alliance for the Future of Food, and the Society for Behavioral Medicine.

In 2020, the Alliance focused four monthly newsletters on the topic of COVID-19. Letters from the Director have highlighted the intersection of COVID-19 with [childhood obesity](#), [mental health](#), and [lessons learned from H1N1 influenza](#). In July, guest author Dr. Fatima Stanford Cody contributed a piece on [Obesity, COVID-19, and Racial Disparities](#).





Weight Can't Wait: a guide for the management of obesity in primary care

In 2019, the STOP Obesity Alliance received an independent medical education grant from Novo Nordisk to convene representatives from health care provider organizations and obesity experts. Experts at the initial convening agreed that when weight counseling is appropriate, health care professionals need a short, accessible, practical, informative guide for obesity treatment. Subsequent meetings and communications were devoted to the development, review and editing of a guide that would be useful to members of each organization.

The final product, Weight Can't Wait, is a guide for the management of obesity in the primary care setting, and has been endorsed by eleven leading health professional organizations that participated in the development of the guide:

- American Academy of Physician Assistants
- American Association of Clinical Endocrinologists
- American Association of Nurse Practitioners
- American Board of Obesity Medicine
- American College of Physicians
- American Medical Group Association
- American Society of Metabolic and Bariatric Surgery
- Endocrine Society
- Obesity Action Coalition
- Obesity Medicine Association
- The Obesity Society

The Weight Can't Wait guide is broken down into three parts: pre-encounter, encounter, and post-encounter.

- In the pre-encounter, providers gather information to start a weight-related conversation with the patient. Patients should be asked for their permission to be weighed. If the patient chooses not to be weighed, providers should respect their decision. BMI should be calculated and used with other metrics to determine a diagnosis of obesity.
- In the encounter, we outline a 6 “A”s model for weight management counseling: Ask, Assess, Advise, Agree, Assist, and Arrange. A model for the patient encounter is shown below.
- The post-encounter is divided into two sections based on whether the patient is interested in pursuing treatment. If the patient is interested, the provider should present the patient with a list of the decisions they made together and schedule a follow-up visit to assess progress. If the patient is not interested in pursuing treatment of obesity, the provider should indicate their availability for future discussion.

The guide concludes with recommendations and tips for standard operating procedures and time-savers. A [list of resources](#) for all providers is also provided on our website.

Our goal in 2021 will be to promote the guide to the organizations that have endorsed it through our website, webinars, and future certified medical education.



weight can't wait

Encounter



Pre-screen

- BMI and weight trajectory
- 24h dietary recall
- Personal weight history
- Medications
- Physical activity
- Existing comorbidities or risk factors
- Stress
- Sleep
- QOL
- Depression



"Is now a good time for us to discuss how your weight and health may be affecting each other and how we can work together on it?"

Yes.



No.



Questions for Patient

- What concerns you most about your weight?
- What is the single most important outcome that you hope to achieve with weight loss?
- What would stand in the way of achieving this outcome?
- Is there a first step that you are ready to take?
- What impact will the changes we have discussed have on your life?
- Obesity is a chronic problem. What frequency and type of follow-up would be most helpful?

Provider:

"I understand that you may not be ready to discuss your weight. However, I am concerned about the impact of your weight on your health. There may be some things that we can do together in the future. Please make a follow up appointment if you'd like to discuss this in the future."

Response from Provider

- Acknowledge concerns
- Link obesity to comorbidities
- Provide resources
- Schedule follow-up or referral



Fast Fact Sheets

In 2020, the Alliance re-introduced ten fact sheets, exploring topics like early life obesity, obesity in the workplace, and weight stigma. In addition, we introduced three new fact sheets: racial disparities and obesity; COVID-19, food systems and obesity; and obesity and COVID-19.

Looking forward, the Alliance will continue to build out this library of resources on new topics as needed and continue to update the fact sheets as new data become available. The fact sheets continue to be widely shared on social media and we encourage others to share them in provider's offices and wellness centers to help educate about obesity.

The fact sheets are freely available at go.gwu.edu/obesityfacts.



FAST FACTS

STOP OBESITY ALLIANCE
STRATEGIES TO OVERCOME & PREVENT

Obesity is associated with significantly increased risk of more than 20 chronic diseases and health conditions that cause devastating consequences and increased mortality. Beyond the significant personal toll of obesity, related health complications are driving up health care costs and threatening employers' bottom lines. This updated series of fact sheets provides information on this complicated disease. Download them all at go.gwu.edu/obesityfacts.

Obesity and COVID-19

Severe obesity is a risk factor for complications and hospitalization from COVID-19, especially in younger patients. Many diseases that are commonly comorbid with obesity are also risk factors for COVID-19.

Causes of Obesity

Obesity is a complex disease influenced by behavioral, economic, environmental, and genetic factors. The modern environment makes obesity more likely—foods high in calories are cheap and prevalent and opportunities for physical activity are decreasing.

Obesity-Related Chronic Diseases

Obesity is the leading risk factor for type-2 diabetes and osteoarthritis, a major risk factor for heart disease and hypertension, and is causally linked to 13 different cancers.

Costs of Obesity

Obesity is associated with increased medical expenditures and indirect costs from lost productivity, absenteeism, and disability claims.

Obesity in the Workplace

Obesity can be costly to both employers and employees. Employers wishing to decrease obesity-related costs should consider systematic approaches to workplace wellness.

Health Care Providers and Obesity

Effective obesity treatment involves collaboration, shared decision-making, and communication between providers and patients.

Obesity Care Coverage

Coverage for obesity care is inconsistent across states and health insurance plans and few provide coverage for comprehensive obesity care.

Weight Bias & Stigma

Weight bias and stigma are exceedingly prevalent in our society, impairing the successful treatment of obesity.

Obesity in Early Life

Pediatric obesity has risen over the past few decades, putting children at risk of serious illness. Children and adolescents deserve access to safe and effective obesity treatments.

Benefits of Weight Loss

A 5-10% weight loss through lifestyle intervention, drug therapy, and/or bariatric surgery improves health, quality of life, and financial wellbeing among persons with obesity.

Trends in Obesity Prevalence

Obesity rates differ by geographic location, age, sex, and race, but have been steadily increasing in the U.S. and throughout the world.

STOP OBESITY ALLIANCE
STRATEGIES TO OVERCOME & PREVENT

A product of the Strategies to Overcome & Prevent (STOP) Obesity Alliance at the Sumner M. Redstone Global Center for Prevention & Wellness

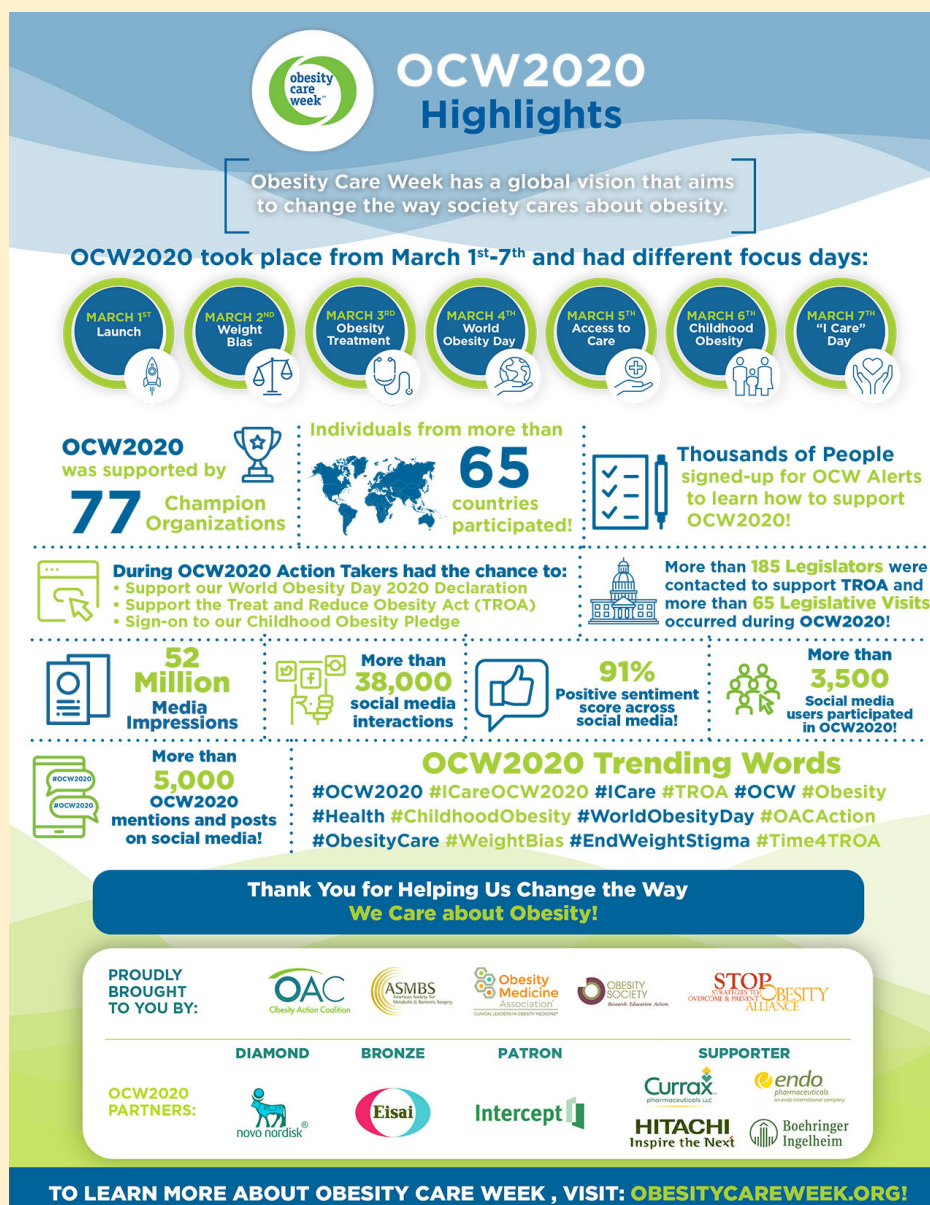
Connect with us: obesity@gwu.edu
[@STOPobesity](https://stop.publichealth.gwu.edu) | @RedstoneGWSPH

Obesity Care Week 2020

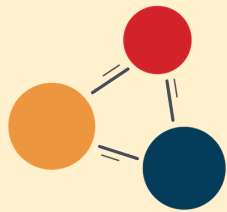
Obesity Care Week (OCW) took place March 1st - 7th. This awareness campaign has come a long way since its inception in 2015, when the Alliance joined with the Obesity Action Coalition (OAC), the American Society for Metabolic and Bariatric Surgery (ASMBS), the Obesity Medicine Association (OMA), and The Obesity Society (TOS) as founding members of OCW.

During this year's OCW, activities included efforts to raise awareness of obesity and the need for access to science-based care, important legislation, and weight bias. OCW was fortunate to have the support of more than 77 Champion organizations, almost half of which are also members of the Alliance. Champions shared information about OCW with their own networks through printed and online materials, and social media channels.

Plans are underway for the next Obesity Care Week, which will take place from February 28th - March 6th, 2021.



Membership Engagement



In 2020, the Alliance conducted quarterly Membership meetings and Steering Committee calls. Throughout the year, the Alliance conducts outreach efforts and continues to utilize publications, exhibitions at scientific meetings and media opportunities to expand its reach. The Alliance sends out a monthly e-newsletter with member updates, summaries of newsworthy research, expert perspective on media coverage of obesity-related news, and a “Letter from the Director” that describes research, treatment, policy and other obesity-related developments. Highlights from Dr. Dietz’s 2020 letters included topics such as: the global syndemic, COVID-19, pharmacotherapy for adolescent obesity, mental health, LGBTQ health, and racial disparities.

The Alliance began a Saturday STOP Spotlight to highlight Alliance members, their new work and upcoming events and meetings. This new social media feature has provided another tool for the Alliance to support the work of member organizations and help make critical connections across the Community.

In 2020, the Alliance’s primary social media channel continued to be Twitter, with audience engagement growing throughout the year. Overall, the @STOPObesity account tweeted more than 325 times, resulting in nearly 240,000 impressions. @STOPObesity ended the year with 8,973 followers, a 3.5% increase over 2019, and more than 240 mentions.



Resources



Curating the Obesity Care Competencies

The Alliance continues to promote the [obesity care competencies](#), developed in 2018 by the provider training and education workgroup to provide a common set of core knowledge, skills, and attitudes essential for optimal obesity care. Each week on social media, the Alliance highlights aspects of the curated collection of promising curricular materials and tools that support organizational efforts to bolster provider training and education. The primary end users for the Competencies, the resource database, and the curricular case studies include educators, administrators, health professionals, policymakers, and other entities directly involved in the delivery or oversight of pre-licensure training for health professionals that care for persons with obesity. An important secondary target includes organizations and systems responsible for designing or delivering professional development and/or continuing education for current health professionals.



State Coverage of Obesity Treatment

Our state-by-state analysis of 2017 Medicaid and State Employee Health Plan coverage for obesity prevention and treatment has continued to be used to increase access to preventive services, nutritional counseling, pharmaceutical therapy, and bariatric surgery. Our article, “Coverage of obesity prevention and treatment in state Medicaid and state employee health insurance plans,” was published in [Obesity](#) in December 2018. In addition to the published findings, we developed an interactive map provides easy state-to-state comparisons. The [map](#) includes state adult obesity and diabetes rates, coverage specifics in Medicaid and state employee health plans, and printable state fact sheets.



Why Weight? Patient-Provider Dialogue

To address the persistent issue of providers' lack of training on the etiology, treatment, and prevention of obesity, the Alliance developed a provider discussion tool in 2014 designed to promote more effective conversations about weight and health with patients. *Why Weight? A Guide to Discussing Obesity & Health with Your Patients*, focuses on skills for building a safe and trusting environment with patients and facilitating open, productive conversations about weight. It also provides potential scenarios that providers may face and suggests ways to navigate the conversations.

The guide, which has been downloaded over 1,000 times since it was developed, can be found at the website www.whyweightguide.org. Also, included on the website is a series of educational videos that feature “what not to do” dramatizations for health care providers as well as what they should do when addressing a patient’s weight. The videos feature our Medical Director, Dr. Scott Kahan.

In 2020, the Alliance continued to promote the guide in our monthly e-newsletters and social media sites, at national conferences, and through our members’ networks.




Weigh In Guide

Parents often report that discussing weight with children can be uniquely challenging for numerous reasons. To address this need, we developed the Weigh In Guide in 2012 to enable productive conversations about weight and health between parents or caregivers and children ages 7 to 11.

The guide provides factual, practical, and sensitive approaches to the many different emotions evoked by discussions about weight. The *Weigh In Guide* remains one of our most requested publications. The Alliance continues to promote it online and when exhibiting at national conferences. The guide is also available in Spanish: *Hablar Con Sus Hijos Sobre el Peso y la Salud*.

Additional resources, scenarios, and tips can be found at the website www.weighinguide.com.

Thank you for your active engagement and support of STOP Obesity Alliance in 2020. We look forward to continuing our partnership and working together in the year to come.

 stop.publichealth.gwu.edu

 [@STOPobesity_](https://twitter.com/STOPobesity_)

 [STOP Obesity Alliance](https://www.facebook.com/STOPObesityAlliance)



Appendix A

Members of the STOP Obesity Alliance

The Steering Committee is comprised of a diverse group of leading public and private sector organizations. Each was selected for its expertise in areas related to obesity, chronic disease and health care.

- America's Health Insurance Plans
- American Diabetes Association
- American Heart Association
- American Medical Group Association
- American Society for Metabolic & Bariatric Surgery
- Gary Foster, PhD
- Donna Ryan, M.D.
- National Business Group on Health
- Obesity Action Coalition
- The Obesity Society
- Trust for America's Health

Appendix B

Associate Members contribute to substantive discussions related to obesity treatment and prevention through inclusion in Alliance projects, participation in public events, and internal Communications.

Academy of Nutrition and Dietetics
Allison Sylvestsky, PhD
American Association of Clinical
Endocrinology
American Association of Diabetes
Educators
American Association of Nurse Practitioners
American Board of Obesity Medicine
American College of Preventive Medicine
American College of Sports Medicine
American Council on Exercise
American Heart Association, Office of State
Advocacy
American Institute for Cancer Research
American Medical Women's Association
American Society for Gastrointestinal
Endoscopy
American Society for Nutrition
Centers for Disease Control and Prevention:
Division of Nutrition, Physical Activity
and Obesity
Commissioned Officers Association of the
U.S. Public Health Service
COPE - The MacDonald Center for Obesity
Prevention and Education
Endocrine Society
Ginger Winston, MD, MPH
Healthcare Leadership Council
HealthyWomen
Institute for Health and Productivity
Management
International Health, Racquet, & Sportsclub
Association

Jacobs Institute of Women's Health
Jennifer Sacheck, Ph.D.
Joslin Diabetes Center
Karina R. Lora, Ph.D., R.D.
Lisa W. Martin, MD, FACC
Medtech Coalition for Metabolic Health
Melissa A. Napolitano, Ph.D.
Michael Long, Ph.D.
Michele Ver Ploeg, PhD
National Academy for State Health Policy
National Association of Chronic Disease
Directors
National Association of Social Workers
National Black Nurses Association
National Hispanic Medical Association
Obesity Canada
Obesity Medicine Association
OCEANS
OsteoArthritis Action Alliance
Pennington Biomedical Research Center
Primary Care Metabolic Group
Rudd Center for Food Policy and Obesity
Stephen R. Cook, MD, MPH
Society of Behavioral Medicine
The COSHAR Foundation
The Ohio State University
UnidosUS
Uriyoan Colon-Ramos, Ph.D.
World Obesity Federation

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