



# STOP STRATEGIES TO OVERCOME & PREVENT OBESITY ALLIANCE

// 2023 Annual Report //

Milken Institute School  
of Public Health

THE GEORGE WASHINGTON UNIVERSITY

Sumner M. Redstone  
Global Center for  
Prevention & Wellness

# STOP STRATEGIES TO OVERCOME & PREVENT OBESITY ALLIANCE

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 and Staff

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The Sumner M. 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. 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. Christine Gallagher, MPAff, Senior Center Administrator for the Redstone Global Center, manages the Alliance. George Washington University School of Public Health graduate student Katie Ghougasian has provided research support. The Alliance is also supported by Redstone Global Center staff, including Rachel Clark, Policy Director, and Kelly Whittier, Senior Center Specialist for Communications, Outreach and Engagement.



# Membership

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Alliance members include 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 membership. 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 includes 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 the list of 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 the list of Associate members.)

## Membership Engagement

In 2023, the Alliance conducted quarterly Membership and Steering Committee meetings. Throughout the year, the Alliance conducts outreach efforts and utilizes publications, presentations at scientific meetings, social media platforms, and press opportunities to expand its reach. The Alliance also distributes a monthly newsletter with member updates, summaries of newsworthy research, expert perspectives on media coverage of obesity-related news, and a "Letter from the Director" that describes current research, treatment, policy, and other obesity-related developments. Highlights from Dr. Dietz's 2023 "Letters from the Director" included topics such as:

- [The American Academy of Pediatric Guidelines for Obesity](#)
- [Iatrogenic Obesity](#)
- [The Effects of Altered Drug Metabolism in People with Obesity](#)
- [School Lunch Programs and Weight Gain During the Pandemic](#)
- [Food Insecurity and Obesity](#)
- [Patient Adherence to Anti-Obesity Medications](#)
- [The Importance of Intensive Behavioral Therapy in the Treatment of Obesity](#)

## Funding

In 2023, the Alliance welcomed four new corporate members: Boehringer-Ingelheim, found, Structure Therapeutics, and Wondr Health. Existing corporate members include Novo Nordisk, Eli Lilly, WW, Currax, and Pfizer. The Alliance is also supported through membership fees of its nonprofit members. In 2023, the combined support from our nonprofit and corporate members amounted to \$224,500.



## How We're Making a Difference

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In 2023, 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.

### Consensus Statement on Obesity

In 2023 the STOP Obesity Alliance collaborated with five obesity advocacy organizations to develop a consensus statement on obesity as a complex, chronic disease. The goal of creating a consensus statement was to assure consistent messages across organizations, address roadblocks that organizations face when working to reduce weight stigma and bias, and improve access to treatment for obesity. The organizations that developed the consensus statement included the Alliance, the Academy of Nutrition and Dietetics, the Obesity Medicine Association, the American Society for Metabolic and Bariatric Surgery, the Obesity Society, and the Obesity Action Coalition.

The consensus statement is as follows:

*Obesity is a highly prevalent chronic disease characterized by excessive fat accumulation or distribution that presents a risk to health and requires life-long care. Virtually every system in the body is affected by obesity. Major chronic diseases associated with obesity include diabetes, heart disease and cancer.*

*The body mass index (weight in kilograms/height in meters<sup>2</sup> (BMI) is used to screen for obesity but it does not displace clinical judgment. BMI is not a measure of body fat. Social determinants, race, ethnicity and age may modify the risk associated with a given BMI.*

*Bias and stigmatization directed at people with obesity contributes to poor health and impairs treatment.*

*Every person with obesity should have access to evidence-based treatment.*





## Obesity Quality Measures Roadmap

Healthcare quality measures are essential to ensuring that physicians and health care organizations provide patients with high-quality treatment for a myriad of health issues. Despite the prevalence of obesity, there is a striking lack of quality measures that matter for obesity care.

In 2023, the STOP Obesity Alliance convened a roundtable of clinical and public health experts, patient advocates, professional organizations, payers, public officials, and other experts to discuss obesity quality measures. The goal of the roundtable was to identify a strategy for developing a comprehensive measure or standardized/uniform set of measures for obesity that would be broadly accepted and widely implemented. We envisioned the strategy to serve as a road map for the development and adoption of future quality measures for obesity.

As an output from the roundtable meeting, Dr. Dietz and Dr. Tracy Zvenyach co-authored a manuscript, "[Quality Measurement Gaps and Future Directions in the Assessment of Obesity](#)," that was published *Current Obesity Reports*.

For 2024, we have proposed a one-day convening meeting of experts to establish a consensus on what constitutes a quality measure for the diagnosis of obesity for adult patients.

## Comprehensive Obesity Benefit

As a first step toward standardizing the availability of obesity care across plans, the Alliance designed a [comprehensive obesity benefit](#) (COB) in 2019 that provides guidance on the core components of obesity care and the conditions under which these services and/or items ought to be covered. In 2023, the Alliance shared the comprehensive obesity benefit at several targeted outreach activities, including:

- The American Association of Nurse Practitioners Health Policy Conference
- Business Engagement in Obesity Solutions Innovation Collaborative, National Academy of Medicine
- Bipartisan Policy Center Event: "[Obesity in the U.S.: Increasing Access to Treatment](#)"
- Diabetes Patient Advocacy Coalition Brown Bag
- Digital Health New York Coffee Chat Obesity Webinar
- Eli Lilly Learning Lab on Obesity
- Milken Institute "Revolutionizing Obesity as a Chronic Disease through Employer Engagement" Roundtable
- Obesity Action Coalition "Your Weight Matters" Conference

In addition, we published a paper in the *Journal of Occupational and Environmental Medicine* in December of 2023, which outlined the core components of obesity care and the need for employers to offer the COB within employee insurance coverage. The paper, which serves as a guide for employers, was informed by a roundtable held in connection with the American College of Occupational and Environmental Medicine (ACOEM).

The Alliance will continue to identify ways to foster the broader adoption of the COB by public and private health care payers in 2024.

## Obesity Care Week 2023

The Obesity Care Week (OCW) campaign has made significant progress since its inception in 2015, when the Alliance joined as a founding member with the Obesity Action Coalition, the American Society for Metabolic and Bariatric Surgery, the Obesity Medicine Association, and The Obesity Society.

During OCW 2023, 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 134 Champion organizations, many 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 currently underway for the next Obesity Care Week, which will begin with World Obesity Day on March 4th and continue through March 8th, 2024.





## Docstyles Survey

Docstyles is a web-based survey instrument developed and administered by Porter Novelli. The survey contains 144 questions designed to provide insight into health care provider (HCP) attitudes and counseling behaviors on a variety of health issues. In 2015 and 2016, the Alliance purchased space in the survey to include a handful of obesity-specific questions to assess HCP beliefs, practices, and knowledge regarding effective treatment modalities and current clinical guidelines for obesity management. The findings confirmed that despite the high prevalence of obesity among U.S. adults, providers have a limited understanding of how or when to deliver evidence-based obesity treatments, a barrier to effective obesity care by HCPs. The Alliance published three articles from the findings from this research.

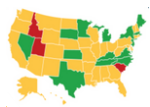
In 2021, the Alliance posed 14 questions in the Spring Docstyles survey to a nationally representative sample of 1,000+ primary care physicians, pediatricians, nurse practitioners and physician assistants. The questions were based on an analysis of recent literature and a review of the questions asked in 2015 and 2016. Some questions from the earlier surveys were repeated to assess changes. Other questions were chosen to assess current knowledge and practice. The results were published in [\*Obesity Science and Practice\*](#), in May 2023. The survey found that many healthcare providers are biased in their perceptions and attitudes regarding obesity management and lack knowledge about how to treat it. Of those health care providers who treat obesity, over half refer patients to registered dietitians, nutritionists, or obesity specialists. Survey respondents noted that barriers to treating obesity included “patients have other higher priority issues” and that patients have inadequate health insurance coverage for obesity care. Almost half of the providers cited lack of knowledge about how anti-obesity medications (AOMs) work or concerns of drug safety as reasons for not prescribing drug therapy. In conclusion, improved familiarity with obesity treatment methods, particularly AOMs, may greatly impact treatment.





## Resources

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### State Employee Health Plan Coverage

In 2021, data on the State Employee Health Plan (SEHP) coverage of obesity benefits were updated for the 2020/2021 plan year. Alliance staff conducted a state-by-state analysis of SEHP coverage for obesity prevention and treatment, including preventive services and counseling, nutrition counseling, drug therapy, and bariatric surgery.

This research was published in *Obesity* in August 2022, in an article entitled "[Coverage for obesity prevention and treatment: analysis of state employee health plans and use of benefits.](#)" An [interactive map](#) with the results of the research is available on the Alliance website.



### Medicaid Coverage of Obesity Treatment

Our state-by-state analysis of 2017 Medicaid 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 that provides easy state-to-state comparisons. The map includes state adult obesity and diabetes rates, coverage specifics in Medicaid, and printable state fact sheets.

Plans are underway to update the Medicaid coverage research in early 2024.



### Fast Fact Sheets

All of our 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](http://go.gwu.edu/obesityfacts).

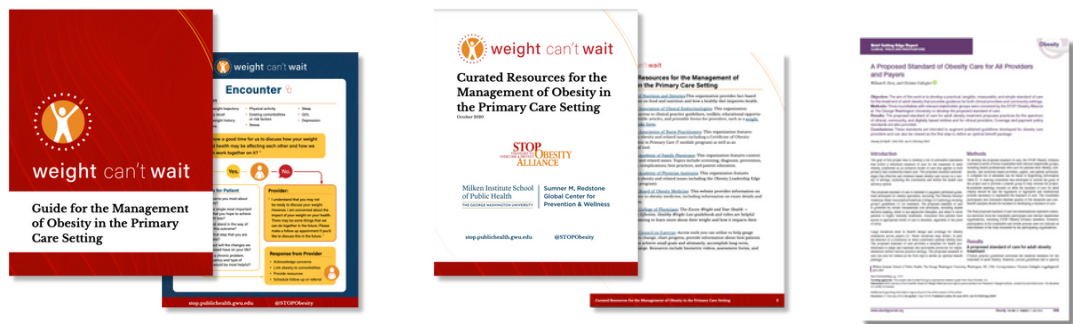




## Weight Can't Wait Guide

The “[Weight Can't Wait guide for the management of obesity in the primary care setting](#)” (WCW), was developed with a research grant in 2020. Eleven of the twelve organizations that participated in the process to develop the guide endorsed the WCW guide. The guide and the process for its development were published in *Obesity* in April 2021 in an article entitled, “Weight Can't Wait: A Guide to Discussing Obesity and Organizing Treatment in the Primary Care Setting.”

In 2024, we will continue to find opportunities to share and promote the guide to health care providers, including in our monthly newsletter and social media sites.



## Why Weight Guide

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 [Why Weight Guide](#) is available on the Alliance website. It includes a list of resources and a series of educational videos that feature ‘what not to do’ dramatizations for health care providers and what they should do when addressing a patient’s weight.

In 2024, the Alliance will continue to promote the guide in our monthly newsletter and social media sites, and through our member networks.



## Curating the Obesity Care Competencies

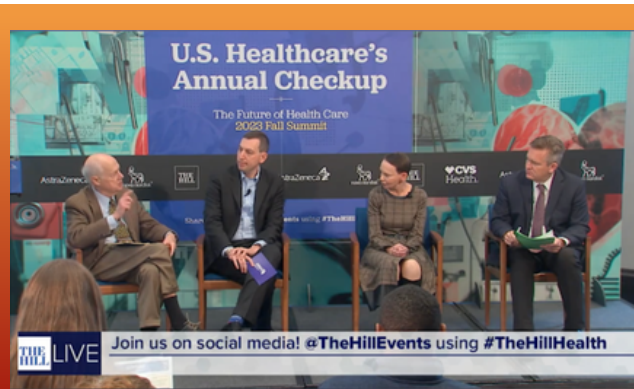
The Alliance continues to promote the [obesity care competencies](#), developed in 2018 by a provider training and education workgroup, to provide a common set of core knowledge, skills, and attitudes essential for optimal obesity care.

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.



## 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 on social media.





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Thank you for your active engagement and support of the STOP Obesity Alliance in 2023. We look forward to continuing our partnership and working together in the year to come.



## Appendix A

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### Steering Committee 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
- Business Group on Health
- Gary Foster, PhD
- Obesity Action Coalition
- Donna Ryan, M.D.
- The Obesity Society
- Trust for America's Health



## Appendix B

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### Associate Members of the STOP Obesity Alliance

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	Jacobs Institute of Women's Health
Allison Sylvetsky, PhD	Jennifer Sacheck, Ph.D.
American Academy of PAs	Joslin Diabetes Center
American Association of Clinical Endocrinology	Karina R. Lora, Ph.D., R.D.
Association of Diabetes Care & Education Specialists	Lisa W. Martin, MD, FACC
American Association of Nurse Practitioners	Medtech Coalition for Metabolic Health
American Board of Obesity Medicine	Melissa A. Napolitano, Ph.D.
American College of Preventive Medicine	Michael Long, Ph.D.
American College of Sports Medicine	Michele Ver Ploeg, PhD
American Council on Exercise	National Alliance on Health Care Purchaser Coalitions
American Medical Women's Association	National Association of Chronic Disease Directors
American Society for Gastrointestinal Endoscopy	National Association of Social Workers
American Society for Nutrition	National Black Nurses Association
Centers for Disease Control and Prevention: Division of Nutrition, Physical Activity and Obesity	National Hispanic Medical Association
Commissioned Officers Association of the U.S. Public Health Service	Obesity Canada
COPE - The MacDonald Center for Obesity Prevention and Education	Obesity Medicine Association
Endocrine Society	OCEANS
Ginger Winston, MD, MPH	OsteoArthritis Action Alliance
Global Liver Institute	Pennington Biomedical Research Center
Healthcare Leadership Council	Preventive Cardiovascular Nurses Association
HealthyWomen	Primary Care Metabolic Group
Institute for Health and Productivity Management	Raymond A. Wood Foundation
International Health, Racquet & Sportsclub Association	Rudd Center for Food Policy and Obesity
	Stephen R. Cook, MD, MPH
	Society of Behavioral Medicine
	The Gerontological Society of America
	The Ohio State University
	UnidosUS
	Uriyoan Colon-Ramos, Ph.D.
	World Obesity Federation





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