Assess

- Client values and goals
- If client would like to discuss overweight or obesity
- Etiology/root causes of overweight/obesity (food insecurity, social determinants of health, genetics, medication, physiologic causes [e.g., endocrine])
- Internalized weight bias and experienced weight stigma
- History of weight management efforts
- Cooking skills and availability kitchen appliances
- Physical characteristics (anthropometrics, biochemical, clinical, dietary)
- Conduct screening for eating disorders/disordered eating, mental health

Refer

To physician, exercise practitioner, mental health practitioner as needed and desired by each client



Diagnose

• Risk factors for co-morbidities (e.g., pre-diabetes, excess adiposity, pre-hypertension)



• Co-morbidities (e.g., diabetes, hypertension, dyslipidemia, CVD)

Intervention Approaches

- Tailor interventions to each client's needs and goals
- Engage in shared decision-making
- Use person-first, inclusive language
- Avoid blame, judgement or bias
- Co-create S.M.A.R.T. goals with each client
- Prioritize outcomes for improved health and well-being
- Advise interventions with evidence to improve desired outcomes
- Co-develop dietary strategies that allow for long-term adherence
- Ensure goals and interventions are culturally acceptable and feasible in terms of food preparation/cooking skills and availability of kitchen appliances
- Create a physical environment that is accessible for all clients
- Discuss and co-create solutions to identified barriers
- Use and advise behavior modification strategies
 - Motivational interviewing
 - Client self-monitoring (diet, physical activity, weight)
- Encourage physical activity
- Refer to other health professionals and community resources as needed.

Dietary Interventions

- Tailor dietary pattern to clients' needs and preferences.
- Choose a dietary pattern with evidence supporting improved outcomes of interest.



- When weight loss is appropriate and desired, reduce calorie intake to a level that is feasible for adherence.
- Ensure dietary changes achieve and maintain nutrient adequacy
- Advise a diet including a variety of fruits and vegetables, healthy fats, nuts, whole grains, low fat dairy, and lean protein sources
- Identify/discuss portion control strategies
- Facilitate development of cooking skills
- Address relationship with food
- Consider education on mindful eating
- Ensure adequate hydration
- Facilitate meal planning
- Educate on food labels and food marketing
- Plan for eating out and at social functions

Monitor & Evaluate

Positive and adverse effects of intervention on health behaviors, risk factors and health outcomes

