

The following are some learning related to weight management and psychological intervention

Empathy and a non-judgemental attitude are crucial

Many of the parents and kids are worried about being judged or blamed for the child's weight. This can lead them to feel defensive, which severely compromises their ability to engage in treatment. Take time yourself to reflect on the concept that everyone is doing the best that they can with the resources that they have. Resources are far more than money and material things.

Resources include:

- Mental health of the parents
- Social supports available such as family and supportive friends
- Child's school environment
- Energy the parent has to spread between work, other children, themselves and other commitments in their life
- Resources are also the skills and beliefs that parents gained (or did not gain) during their own upbringing.

Take some time to explore and acknowledge these factors with families.

Motivational Interviewing (MI) is very helpful

Brush up on an MI approach, as this is well suited to these families who need help with increasing motivation and confidence to change. It also suits the brief intervention format of the clinic.

- Be on the look-out for change talk
- Identify reasons for change
- Explore values and identify the discrepancies between these and current health behaviours
- Ask children and parents how confident they feel to make the changes discussed (can rate out of 10). Have them identify what makes them feel this confident, and explore what could bump them up a point or two e.g. meal plans, specific types of support from family, visual scheduling

Family approach

For the child to have the best chance of success, changes need to occur at the family level. From the type of food in the house, to parent modelling of healthy eating and activity, the child needs to be supported by the family.

- Engage both the parents and the child in the session where possible
- Ask them how they can support each other

- Encourage those who have attended the session to sit down with the rest of the family and discuss both the proposed changes and the important reasons for the changes
- Discuss how to create buy-in within the family e.g. can others help with meal ideas, shopping and meal preparation? Will someone go for a walk with the child or play a sport?
- Encourage the child to think about how they would like the family to support them e.g. practical support like preparing lunchbox, cheerleading, gentle reminders about their goals when making food choices?

Deciding on this together can help stop the child feeling picked on, and stop the family feeling like their support is not well-received.

There will be parents that expect the child to make changes on their own within an unchanged family home environment. Encourage the parent to have realistic expectations of their child. Talk about how difficult it is for an adult to resist tempting foods, and let them know that it far more difficult for a child. Often the child will mention that having tempting foods in the house is one of the main challenges they face.

Health-behaviours versus focus on weight

Focus on how well the child's feel like they are going with the behaviour changes they are aiming for, and any emotional reactions that they have about their weigh-in.

Use weight as a tool only. It is information that tells us if the changes we've made have been enough, or if we need to add another step in for the next week.

Focus on health behaviour changes:

- Encourage patients to see each new behaviour change as the great step that it is, rather than focusing only on the number on the scales
- Prompt patients to be observant as they make behaviour changes and notice the range of benefits that arise, e.g. more energy, tummy feels better, improved concentration, feeling proud of self for behaviour change, enjoying the foods
- We are building a healthy and sustainable lifestyle, rather than simply dieting for weight loss

Goal-setting principles

Families often feel overwhelmed by the enormity of the changes required, and their ability to make changes is then greatly reduced. Psycho-education about goal setting can be incredibly helpful.

Discuss the factors that maximise chances of success when setting goals:

- Make the goal specific. If they want to focus on diet changes, drill down further, down to increasing vegetable intake, down to adding more vegetables to the lunchbox, down to trying raw carrot sticks 3 days next week and making this happen by doing the grocery shopping on Sunday and cutting the carrots to store in portions in the fridge. Getting this specific helps uncover areas that they may not feel confident about and to troubleshoot

before they even try. This gives families the best chance of success. Some families may find it easy to come up with these plans with little prompting, others may benefit from more specific suggestions.

- Pick one small change to start with. What do they feel the most confident to do at this stage? Give them the best chance of success. Great if this can be collaborative with the child
- Encourage a detective mindset! Families can feel very worried about review appointments if they have not made significant improvements. Let them know that whatever happens, it will be important information to have. The detective mindset can be useful when families have a tough time imagining sticking these changes forever; as a detective you just try it out and notice if it was easier or more difficult than you expected, what benefits came out of it, what made it challenging, how did you feel, what kinds of thoughts did you have?

Behaviour modification principles

Some parents will be very worried about the tantrums their child will have when they start to make changes in diet, say no to certain foods, or put limits on screen time. Set the parents up with knowledge and skills to manage the behaviour:

- When they change the boundaries for the child, it is normal for the behaviour to get worse before it improves. The child is trying to find the new boundary. Start changes when you are in the best position to manage this behaviour (get some sleep; have someone mind the other kids for a day, anything you can do to help yourself out). Intermittent reinforcement (giving in occasionally) will keep the behaviour going for longer.
- It can be helpful to help parents plan specifically how they will cope with any tantrums e.g. walk away, ignore, focus on breathing to keep calm, remind self of important reasons for change

Keep reviews on track

Reviews are short and need to be kept focussed to be of benefit. It may be helpful to discuss 3 main points:

- What went well? Find some success - *so they tried having breakfast for a couple of days and then stopped? That's great that they took the step to try!* What was it like? How did they manage to do it those times? What benefits did they notice?
- What could have been better? What did they have trouble with? What happened?
- What can you do differently next time to improve your chance of success? Is this the right goal to start with? Do they need more food/nutrition information? Do they need to do some problem-solving? An MI approach can be especially helpful here to build on confidence and motivation. E.g. "Even though there have been some obstacles, you've taken steps/thought about things that you hadn't before tried, and you're here today because your child's health is a priority to you".