



Successful Healthway Projects

Shape Up

The Shape Up program trained community facilitators to conduct weight management courses and encourage lifestyle changes.

Case Study

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Shape Up

Organisation:	Avon Health Promotion Team Inc.
Healthway funding:	\$10,500 (Funded: Promotional material, administration expenses and evaluation. Participants paid \$35 each over the entire program to cover remaining costs.)
Program Period:	16 months
Target Group:	Community health workers and other adults from the Coastal and Wheatbelt health region
Year:	1999 - 2000
Number of Participants:	32 community health workers and up to 200 participants

What was the project about?

The Shape Up program, adapted from Queensland Health's successful "Lighten Up" project, addressed the high levels of overweight and obesity in the Coastal and Wheatbelt health region. The project trained community facilitators to run the 7 week structured weight management program in their own community. The program involved a holistic approach to encourage healthy weight by focusing on:

- Developing healthy lifestyle habits around food choices and physical activity.
- Emphasising that 'dieting' is not recommended as a healthy and sustainable weight loss strategy.
- Encouraging self-responsibility and providing skills training.
- Identifying changes needed in the community to support a healthy lifestyle.
- Involving a range of health professionals.

What strategies were used?

The project conducted four Shape Up facilitator training courses, providing information on:

- Nutrition, the principles of healthy eating to lose weight and the importance of physical activity.
- Adult learning and group facilitation techniques.
- Developing community activities for different groups.
- Ways to provide long-term support in maintaining healthy lifestyle behaviours.
- 'Food Cent\$' strategies – getting value for money when food shopping and achieving a balanced diet.

The facilitators were supplied with resources to implement the Shape Up program in their communities.

They then ran 7 week programs that supported participants to set goals, make healthy food choices, understand food labels and modify recipes. A social event was held, enabling participants to practice their skills, and a buddy system was introduced to support the Shape Up participants. Regular project newsletters kept participants informed, and the facilitators provided participants with follow-up support at three and six months.

The facilitators were provided with regular support by the project coordinator to develop Shape Up activities for their communities. The project was promoted through newsletters, local press and brochures.

What did the project achieve?

- Thirty-two Shape Up facilitators were trained during 4 training courses.
- Twenty-two Shape Up courses were run in the Coastal and Wheatbelt health region, with over 175 participants (97% women and 7% men).
- More than 90% of participants were positive about the program and felt that it represented good value for money.
- 82% of participants who returned for the six month follow-up had either maintained their weight loss or continued to lose weight since the end of the program. 70% had maintained their program weight loss of at least 1kg.
- Participants who returned for the six month follow-up self-reported a 50% increase in physical activity since the beginning of the program.

What Healthway had to say about the "Shape Up" project:

The Shape Up program is a great example of the 'train the trainer' approach, whereby the project coordinator was able to build the capacity of the local community to address an important and relevant local health issue.

What Were the Effective Health Promotion Elements?

1 PLANNING

A community reference group was formed to help plan the project.

The applicants developed a well researched application containing local data, a detailed timeline and clear (SMART) objectives.

A committed working party developed and implemented the project in consultation with:

- The Central Wheatbelt Division of GP.
- Allied health professionals.
- Community health workers.
- Hospital staff.
- The local Be Active coordinator.
- Department of Sport and Recreation staff.
- Queensland Health staff who had worked on the "Lighten Up" campaign.

2 IMPLEMENTATION

The strategies of the Shape Up project were aligned to the Ottawa Charter for health promotion.

A key success factor was training community members as facilitators, as they were best placed to understand the community and implement appropriate strategies.

The Shape Up program supported participants to take control over their weight, as well as provide support to fellow participants.

Information about the project was disseminated through:

- Shape Up newsletters, pamphlets and posters.
- Advertisements in local press and school and community newsletters.
- Referrals through health networks.

3 EVALUATION

Process evaluation included:

- The number of facilitators trained, courses conducted and participants.
- A facilitator training satisfaction survey.
- Facilitator and participant feedback.

Impact evaluation included:

- Client record forms with information on changes in weight, body mass index, blood pressure and maintenance of weight loss, completed by health professionals.
- A self-completed questionnaire on physical activity, perceived changes in body shape/size/weight, behaviour and lifestyle changes and self-help strategies.
- A participant satisfaction survey.

The longer term outcomes were evaluated using six month follow-up questionnaires and included questions on improving the program.

4 SUSTAINABILITY

Sustainability was considered in the planning stages.

The Coastal and Wheatbelt PHU committed to continue funding the coordinator position to provide training and project resources.

In addition, training sessions and resources were modified to enable the program to continue in a modified form if necessary, without the need for central coordination, and run by facilitators.

A comprehensive final report increased the transferability of the project.

What lessons were learned?

- Regular telephone contact, network meetings and visits were essential to provide assistance, support and training for the facilitators.
- Reminders and incentives are required to recruit facilitators and improve the return of evaluation information by facilitators and participants.
- The buddy system was not taken up as anticipated and could have been more extensively promoted.
- Some participants indicated the 7 week course was too short, and would have benefited from an additional two weeks.
- Physical activity should be included in each session and more regular follow-ups conducted to prevent a decline in participants' physical activity levels. Involvement of a physiotherapist could assist with the physical activity component.



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