

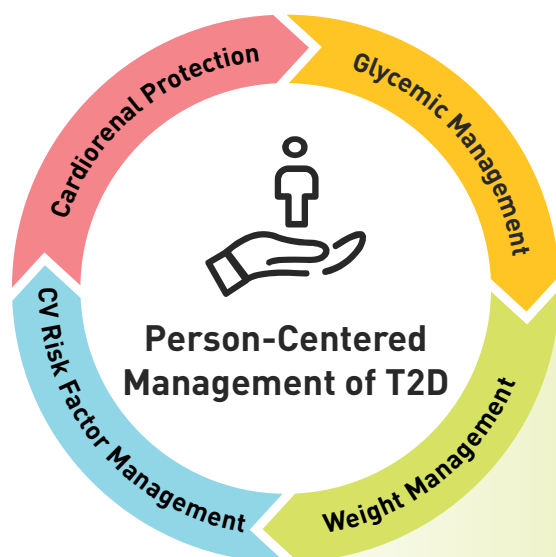


# Type 2 Diabetes Weight Management Workmat Facilitator Guide

## Introduction

Collaboration between healthcare professionals (HCPs) and their patients can improve outcomes for those living with type 2 diabetes (T2D) and excess weight.<sup>1</sup> **Clinicians should use a shared decision-making approach with their patients with T2D to jointly strategize weight management goals and interventions.<sup>1</sup>**

Notably, the most recent consensus statement from the American Diabetes Association and the European Association for the Study of Diabetes has increased the emphasis on weight management as part of a holistic, person-centered approach to diabetes management.<sup>1</sup>



Consequences of weight bias on weight loss efforts include:



Inconsistent self-monitoring



Greater caloric intake



Less physical activity



Increased likelihood of dropping out of weight loss treatment



Less weight loss

*HCPs should approach weight management without any negative attitudes or stereotypes toward people with obesity.<sup>2</sup>*

### Achieve and Maintain Weight Management Goals

Consider glucose-lowering therapies with high-to-very-high dual glucose and weight efficacy

#### Set Individual Goals:

Implementing lifestyle changes

Joining an evidence-based weight management program

Evaluating medications for weight loss

Considering metabolic surgery

The behaviors of a person living with overweight or obesity are influenced by complex factors, including individual understanding and motivation to family support, cultural factors, economics, transportation, and town planning.<sup>2</sup> The goal for weight discussions is to<sup>2</sup>:

- Raise the subject and engage without causing offense
- Avoid individual blame while highlighting the value of individual behavior changes
- Recognize unique cultural and environmental contributors
- Promote understanding that small changes sustained over time can have large effects

While only individuals can change their own behavior, HCPs can collaborate to positively impact their ability to succeed. The 5 A's model shown below outlines strategies for HCPs to have positive, productive conversations about weight management with their patients with T2D.<sup>4</sup>



This workmat is an educational tool about weight management for people with T2D, designed to be used in small group discussions between an HCP and several individuals. Topics include motivational questions, potential challenges with suggested solutions, and tips for progressing through their weight loss journey with specific data-supported goals.

Storytelling is an effective way to lead discussions. This workmat uses the analogy of traveling through a desert to help people with T2D and excess weight walk through their individualized weight management journeys. To make telling the story easy, the workmat includes corresponding explanations next to every scene and provides questions to provoke discussions. There are no “right” answers, only thoughts to help support individuals in making behavioral changes.

For best use, print the workmat in table size, or use it as a wall poster, and have the small group gather around it. Additional resources listed below accompany the workmat to tailor content to individuals’ needs and aid more in-depth discussions:

- Facilitator guide to help HCPs navigate weight management conversations with people living with T2D
- Flipchart for 1-on-1 conversations
- Fill-in-the-blank stickers to individualize goals and challenges
- Interactive mythbuster activities
- Educational handouts to help participant understanding of weight loss physiology and interventions

This facilitator guide is designed to encourage thoughtful and memorable discussion around weight management. Included are guided questions that should serve as a starting point to encourage active participation by all individuals. Some questions may not be relevant to all participants. Consider the level of communication from each participant when navigating this workmat and answering questions as some words or phrases may be unfamiliar. Please allow these conversations to grow organically, and do not feel constrained by the questions or the order by which they appear in this guide. Each small group will navigate their own way through the workmat. Making health behavior changes is a journey, not just a single event, and having several short group sessions could be more effective to support this journey.



**Using appropriate language during weight management conversations is a simple, implementable technique that physicians can use to lower anxiety, build confidence, and support self-care.<sup>1,3</sup>**

Appropriate language should:

- Be person-centered, neutral, and non-judgmental
  - For example, *person with obesity* instead of *obese person*
- Be based on facts, actions, or physiology and free from stigma or blame
- Foster patient-provider collaboration
  - For example, “Could we talk about your weight today?”
- Be respectful, inclusive, strength-based, and hope-inspiring with an emphasis on achievable lifestyle changes and health improvement



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## Workmat Summary

This workmat is designed to help facilitate informative and meaningful conversations that will help prepare participants to begin their weight management journeys. The workmat depicts travelers journeying through a desert as an overarching analogy, with each pictorial scene including key knowledge (feasible goals, possible challenges, useful tools, and accessible resources) to better equip individuals for success on their respective journeys. For example, “mythbusters” can address common and possibly detrimental misconceptions that are associated with weight loss and weight management.

For the workmat to enable people with T2D to successfully plan and execute their weight management journey, active participation and discussion are required. This facilitator guide outlines small group discussions that can be used by HCPs to help people with T2D who want to change their behaviors and take effective action best fitted to their personal motivations.

## Session 1: Introduction

*Listening is the key skill for facilitators for this session. You can decide where the best place to start on this workmat is based on your group's mindset, motivation, current lifestyle, and priorities.*

### Telling the Story

Similar to the illustrated scene, people with T2D and excess weight are readying to step away from a place that they are familiar with, unsure of where their weight management journeys will take them.

### Empowering With Knowledge

Weight loss in individuals with T2D and excess weight has been linked to improvements in glycemic control, including substantial reductions in glycated hemoglobin (HbA1c) and fasting glucose levels, improved cardiovascular outcomes, and reduced need for glucose-lowering medications.<sup>3</sup>

Share how weight management for people with T2D can help them achieve their goals for glycemic control outside of their current anti-hyperglycemic medications.



*Scene: Travelers comfortable in their home city, contemplating a long journey through the harsh desert.*

### Guiding the Discussion

For most people, changing a health-related behavior is an ongoing process with which they need continuing support. Use this discussion to help participants assess their feelings of Importance, Confidence, and Readiness to start making behavior changes.

Begin the discussion by asking the group what they think is the importance of weight loss and what their confidence is in managing their weight. Ask participants to share past successes and failures and what they learned from that. Help them understand and outline what their priorities and goals are for their quality of life, health, and weight loss.

## Session 1: What Motivates You?

*It is important to engage with each individual to assess their readiness and offer support to help them make sustainable changes. The goal of this piece is to gain a better understanding of the participant's mindset in terms of their comfort with their own weight and the idea of losing weight.*

### Telling the Story

Although weight management journeys may not involve physical travel, they still require careful thought and planning to be successful. Helping participants establish their motivations and feelings of readiness will help them to get started on the right foot. Ask participants if they are ready to go on their journeys.

### Empowering With Knowledge

Explain that motivation is important and that you also should be clear what your goal is and what you want to be able to achieve every day and long-term. For any journey, you first need to know where to go and then get prepared. When going on a journey, it is important to take the first step and then continue that start with small steps.

Reinforce the relationship between weight and T2D detailed in the module above.



*Scene: Before embarking on their journey, the travelers take time to contemplate their motivations, make a plan, and prepare for the obstacles in front of them.*

### Guiding the Discussion



To help the group answer the question, “Why is weight control important to you?” have each participant complete the scaling and readiness questions in the **Getting Started** **handout**.

Discuss with the group how different levels of motivation necessitate unique journeys adapted to best fit each person. Use the following questions to facilitate further discussion on realistic goals for each participant:

- What do you want to achieve?
- Which goals fit best into your lifestyle?
- What are some small first steps you can take toward achieving those goals?

### Reflecting in One-on-One Settings

The 4 states of change can be used to help assess a person's level of motivation and readiness when it comes to changing health habits. The 4 stages of changing<sup>5</sup> a health behavior are, in order, contemplation, preparation, action, and maintenance.

- Contemplation: Are you thinking about making changes?
  - How would life be better if you made some changes to improve your health and energy levels?
  - What roadblocks are keeping you from starting a new routine?

## Session 1: How Do You Prepare to Lose Weight?

*Initiating a weight loss plan can be intimidating for people with T2D when trying to figure out what will be most effective. The goal of this piece is to provide a general overview of some evidence-based options for losing weight and generate discussion on what might work best for your group.*

### Telling the Story

Just like when traveling geographically, there are different ways to travel through an emotional and physical journey like weight management. Everyone should choose the strategy best suited to them. They can be their own travel guide or consult with an expert for directions, enjoy the scenic route with a camel, or hop in a dune buggy to follow the most direct path. Also, do not forget that they can adapt and change strategies during their journey as needed.



*Scene: To prepare for their expedition, the travelers select a vehicle that suits their individual needs and preferences.*

### Empowering With Knowledge

Be prepared to speak to or answer questions about the following strategies<sup>2</sup>:

- **Dietary changes**<sup>3</sup> individualized to patient preference and nutritional needs
  - Evaluate systemic, structural, and socioeconomic factors that can impact food choices
- **Physical activity**<sup>3,6</sup> goal of 150 minutes of exercise per week for health maintenance
  - Weight loss and weight maintenance may require greater exercise goals, and an individualized, stepwise plan to achieve a sustainable increase should be implemented
- **Behavioral counseling**<sup>3</sup> with trained interventions for ≥16 sessions (group or individual) during the initial 6 months
  - Focus on dietary changes, physical activity, and behavioral strategies to achieve goals
- **Medications**<sup>3</sup> should be reviewed by an HCP and evaluated for alternative options to medications associated with weight gain
  - Assess response to treatment (efficacy ≥5% body weight loss) and safety of anti-obesity medications for people with T2D
- **Metabolic surgery**<sup>3</sup>, which is often called *bariatric surgery* or *weight loss surgery*
  - Metabolic surgery can promote significant and durable weight loss and improve T2D in patients with or without severe obesity (body mass index ≥40 kg/m<sup>2</sup> or 37.5 kg/m<sup>2</sup> in Asian Americans)

### Guiding the Discussion

Discuss with the group which strategy has worked best for them in the past and how they would like to travel going forward on their weight management journeys. Let participants learn from one another, but ensure that strategies are being planned in a stepwise manner.

### Reflecting in One-on-One Settings

The 4 states of change can be used to help assess a person's level of motivation and readiness when it comes to changing health habits. The 4 stages of changing<sup>5</sup> a health behavior are, in order, contemplation, preparation, action, and maintenance.

- **Preparation:** Have you made up your mind? How do you make a plan and act on it?
  - Choose healthy foods you would like to have more often in your daily diet
  - List some unhealthy foods you love that you could eat less often
  - Think about fun physical activities you enjoy and could do more often

## Session 1: Where Should You Start Your Weight Management Journey?

Once a person with T2D has established that they are ready to begin planning their weight management journey, it is important to set clear expectations about realistic goals and outcomes based on the person's current weight and lifestyle and changes that they are planning on implementing. The goal of this piece is to set your group up for success by defining specific, achievable goals for their weight loss within a realistic timeframe.

### Telling the Story



Let participants begin writing their own stories by introducing them to their **Personal Map**. This

handout includes an empty version of the workmat along with stickers to help participants fill in the blanks to create their own personal roadmap to success. Allow the group to make their own choices for:

- Weight loss goals: Obtain 5%-15% weight loss in what timeframe?
- Strategies for realistic change: How does their workmat mode of transportation represent their real-life approach?
- Support systems: Everyone needs a travel guide to help navigate rough terrain. Who are they most comfortable reaching out to for help: family, friends, or their HCP team?
- Weight loss benefits: Which of the benefits included in the handout stickers are most important to them?

### Empowering With Knowledge

Maintain a person-centered communication style to optimize patient health outcomes and health-related quality of life.<sup>3</sup>

- Use people-first language to avoid defining patients by their condition
- Assess an individual's medical status, cultural circumstances, and food availability, as well as personal preferences and beliefs
- Discuss accommodations that can be made to ensure privacy during weighing
- Measure and report weight nonjudgmentally

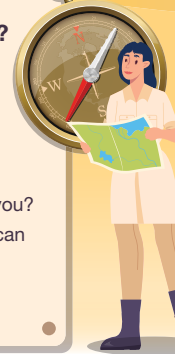
Be prepared to:

- Establish goals and expectations with your group members<sup>3</sup>
  - Recommendation for most people with T2D and overweight/obesity: diet, physical activity, and behavioral therapy to achieve and maintain ≥5% weight loss
- Advise on the benefits of modest, sustained weight loss among people with T2D and overweight/obesity<sup>3</sup>
  - Improved glycemic control, blood pressure, and lipids
  - Decreased risks for cardiovascular disease and mortality
  - Reduced need for related medications
  - Improved health-related quality of life measures
  - Improved mobility and physical and sexual function

#### Where should you start your weight management journey?

Set yourself up for success by discussing with your clinician:

- What is your goal?
- What can you realistically change in your daily life?
- Who can support and encourage you?
- What do you start with, and what can you add later?
- How does weight loss benefit you and your diabetes management?



*Scene: As they begin their journey, each traveler consults their map and compass to chart their course through the desert.*



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### **Guiding the Discussion**

Use the map and stickers provided in this handout as a way to visualize the goals of each member of the group. These personal roadmaps can continue to be used in subsequent sessions to record the successes of each team member. While this display can provide additional motivation, there is also a risk for demotivation if members feel as if they failed. To avoid feelings of competition, ensure that all successes are celebrated equally. One strategy to remain unbiased is to use the handout for group results, with individuals placing their stickers anonymously. Remember to provide feedback and ensure that all questions have been answered clearly and that the map accurately reflects those answers. Then let participants lead the discussion and share their personal journeys and goals with the group.

### **End of Session 1**



## Session 2: What Challenges Might You Face?

*Each person's unique life experiences will factor into what challenges they may face along their weight management journey. The goal of this piece is to provide an opportunity to assess areas in which people with T2D may benefit from educational materials, additional support from friends and family, or expanding their healthcare team to meet their weight management needs.*

### Telling the Story

When on a challenging journey, there often are temptations that can turn travelers toward the wrong direction. Sometimes these temptations are obvious and easy to identify. However, some temptations are designed to be misleading and appear as incredible new solutions when in reality they are as much of a fantasy as a desert mirage.

### Empowering With Knowledge

Barriers to weight management include:

- Finding time in an already busy routine for weight loss<sup>7</sup>
- Lack of access to healthy foods<sup>8</sup>
  - Food security is defined as having access to healthy, affordable food<sup>8</sup>
  - Prevalence of food insecurity is higher among adults with diabetes compared to those without (16% vs 9%)
- Lack of nutritional knowledge<sup>7</sup>
  - Many myths exist about healthy eating, fad diets, and supplements
- Changes in family eating habits and lifestyles<sup>9</sup>
  - Chances of a person developing obesity increase if they have a friend, sibling, or spouse who develops obesity

Be prepared to address the following strategies for overcoming barriers to weight loss:

- Use educational resources: [USDA dietary guidelines](#),<sup>10</sup> [ADA website](#),<sup>11</sup> [CDC website](#),<sup>12</sup> [NIDDK body weight planner](#)<sup>13</sup>
- Habitually write down food intake information<sup>14</sup>
- Use meal replacements to help limit caloric intake<sup>14</sup>
- Use phone-based or internet-based programs that provide structure and coaching support<sup>14</sup>
- Consider pharmacologic therapy, medical devices, and metabolic surgery for select patients as adjunct strategies<sup>3</sup>



*Scene: The traveler strays from the path through the desert, tempted by the mirage of an oasis.*

### Guiding the Discussion

Welcome everyone back to the group, and start by celebrating successes. Use the following discussion prompts:

- Have you started to make changes?
- What changes have you made?
- What have been your successes?

Next, move the discussion to address any challenges that the participants may have dealt with or are still dealing with:

- What challenges have you faced?
- Were you able to manage or overcome these challenges?
- What strategies did you use?

Allow the group time to share and learn from one another. If there are no helpful solutions to the presented challenges provided by the group, step in to advise on how to overcome those challenges. For example, if a participant is tempted by the smell of the bakery that they pass every morning on the way to work, suggest finding a different route.

The group's workmat from the previous session can be used with different colored stickers to visualize successes and challenges.

### Reflecting in One-on-One Settings

The 4 states of change can be used to help assess a person's level of motivation and readiness when it comes to changing health habits. The 4 stages of changing<sup>5</sup> a health behavior are, in order, contemplation, preparation, action, and maintenance.

- **Action: Have you started to make changes? Are you following your plan?**
  - Track your progress toward meeting your goals (eg, journals, electronic trackers)
  - Overcome roadblocks by planning ahead
  - Reward yourself

## Weight Loss and Weight Management Mythbusters

The next 3 session activities are intended to help dispel common myths about weight loss and weight maintenance that people with T2D might currently view as real obstacles in their journeys. The mythbuster activities for this session do not have to be used in the same order as in this guide; myths most relevant to each group can be prioritized.



These **mythbuster activities** are included as “**2 Facts and a Myth**” handouts that ask participants to “spot the myth” among 3 statements. Read all 3 statements aloud to the group, and then allow them to answer by show of hands which statement they believe is false. The solutions are upside down on the bottom of each handout.



Alternatively, a card-based “**True or False**” trivia game is also provided for each of the mythbuster activities. Ask a participant to read the front of the card, and discuss if they believe the statement is a myth or a fact and any preconceived ideas or feelings that they may have. Then flip the card over for the solution.

Use the additional information provided within each mythbuster section in this guide to help explain and facilitate discussion amongst the group on why each statement was myth or fact, true or false. Afterwards, have the group add what strategies they can use to overcome these myths and obstacles on their personal map.

## Mythbuster Activities

### Mythbuster: What Diet Works?



*People with T2D are likely overloaded with advertisements for quick and easy weight loss solutions, some of which may at first appear to be science-based. The goal of this piece is to arm participants with knowledge on the*

*potential harms of weight loss supplements and provide them with a foundation of evidence-based strategies for implementing dietary changes.*

#### Additional information

- Caution: Dietary supplements are a profitable industry<sup>15</sup>
  - Americans spend approximately \$2.1 billion per year on weight loss pills
- Warning: There is no evidence that dietary supplements are effective for weight loss<sup>3</sup>
- Danger alert: Some supplements can interfere with medications and pose physical harm<sup>15</sup>
  - Common ingredients found in supplements can interfere with glucose-regulating medications
  - Weight loss products marketed as dietary substances can be tainted with controlled substances and prescription drugs
- There is no one “diet” that is effective for improving glycemic control and addressing weight for people with T2D<sup>16</sup>
  - A meal plan is not a diet, but an individualized guideline for more healthful eating
- Strategies for implementing dietary changes include:
  - Restrict calories as per medical direction<sup>3,14</sup>
  - Use evidence-based meal replacement plans<sup>3</sup>
  - Consult with a dietitian<sup>17</sup>
  - Spend 15 minutes (or less) recording meals in a food diary<sup>18</sup>
  - Focus on a goal that is meaningful to you<sup>18</sup>

**What diet works?**

➔ **MYTH**

“Following weight loss trends will get me results fast!”

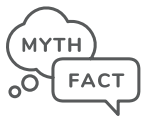
➔ **FACT CHECK**

- Restrict your calories
- Develop a meal plan
- Make small changes to foods already in your diet
- Consult with a dietitian

*There are many ways to have a successful, healthy diet! What ways best fit you?*

*Scene: Each traveler has multiple choices to make along their journey. Guides are available along the way.*

## Mythbuster: What Exercise Works?



*People with T2D may be intimidated by the idea of implementing an exercise regimen based on the popular myth that workouts need to be long and intensive to make a difference. The goal of this piece is to dispel this fear by helping the group set realistic goals and reframing the discussion on exercise by highlighting its benefits, tailored to individuals.*

### Additional information

Set a weekly goal<sup>18</sup> of 150 minutes (~20 minutes/day) of moderate physical activity, like brisk walking, or 75 minutes of vigorous activity, like jogging.

Set a twice-weekly goal<sup>18</sup> of strength/resistance training that involves all major muscle groups using weights or resistance bands.

Long-term weight loss maintenance is likely to require greater exercise than the above health maintenance goals, so plan incremental increases to achieve targets.<sup>6</sup>

- Target 200-300 minutes of moderate-intensity physical activity per week<sup>6</sup>
- The amount of exercise required should be individualized<sup>6</sup>

Advise that exercise can be any physical activity they enjoy if it gets their heart rate up!

- For aerobic exercise, aim for a heart rate of >120 beats/minute
- Examples include using stairs instead of an elevator, playing with their kids, and playing virtual reality games
  - A more in-depth list of moderate and vigorous activities can be found in the [General Physical Activities Defined by Level of Intensity](#) table<sup>19</sup>

Tailor exercise plan for individual needs. For people with T2D:

- Consult on timing of meals, insulin needs, and vigorous exercise to reduce chances of hypoglycemia<sup>20</sup>
- Recommend a combination of aerobic and resistance exercises for optimal outcomes<sup>21</sup>
- Discuss how alternative balance training options, like tai chi, can reduce fall risk by 28%-29% and improve glycemic control and neuropathic symptoms<sup>21</sup>

Share strategies for success<sup>22</sup>:

- Short, spread-out sessions: 10-minute sessions, 3 times a day
- Set SMART goals: specific, measurable, attainable, realistic, and time-bound
- Fine tune and track your progress: build gradually, and log your workouts

An illustration of a person in a desert landscape, wearing a white shirt, tan pants, and a hat, holding a shovel. A signpost is in the foreground with text about exercise myths and facts.

**What exercise works?**

→ **MYTH**

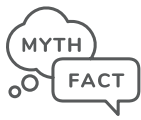
"Working out needs to be long and intense to count."

→ **FACT CHECK**

- Exercise can be anything you enjoy as long as you get your heart rate up
- Consult with your clinician before starting an exercise program
- Consider professional exercise guidance or classes

*Scene: There may be obstacles along the way blocking or slowing the journey. Tools and support are available to help clear the path.*

## Mythbuster: Where Do You Find the Time?



*The sheer number of dietary and exercise changes to be made may overwhelm people with T2D, leaving them with the false impression that they do not have to time to incorporate all these adjustments into their routines. The goal of this piece is to help the group simplify this process by educating them on meal planning guidelines and giving examples of common, accessible activities that can count as exercise.*

### Additional information

Explain to participants that they can save time by following evidence-based meal plans and that there are many meal-planning guidelines available for people with T2D.<sup>16</sup>

- [Choose My Plate](#)<sup>16</sup>
  - Replaced the USDA Food Pyramid
  - Visually illustrates foods and portion control on a small plate
- [Mediterranean-Style Eating](#)<sup>16</sup>
  - Observed to improve glycemic control and cardiovascular disease risks
- [Diabetes Nutrition Placemat](#)<sup>16</sup>
  - Physical placemat that can be used with a wipe-off marker
  - Side 1: Meal planning food lists with serving sizes for each category
  - Side 2: "Plate method" illustration for easy visualization of appropriate portions
- [Create Your Plate: Meal Planning Tool Kit](#)<sup>16</sup>
  - Online portion control tools
- [DASH Eating Plan](#)<sup>16</sup>
  - DASH = Dietary Approaches to Stop Hypertension
  - Balanced eating plan that lowers high blood pressure and improves lipid levels to reduce risk of developing cardiovascular disease

Encourage participants with a fun fact: 10 minutes of exercise 3 times a day gives you the same cardiovascular benefits as 30 minutes all at once.<sup>22</sup>

- Think about 3 spots in your day in which you could fit 10 minutes of exercise
- Something as simple as vacuuming for 10 minutes could get your heart rate up



*Scene: The traveler's progress is slowed down by an oncoming sandstorm.*

## Session 2: How Do You Stay Motivated to Lose Weight?

*Keep in mind that people with T2D have differing levels of support outside of their healthcare team and may need an extra helping hand when it comes to staying motivated. The goal of this piece is to provide participants with some no-cost strategies for success and tips for changing their mental framework to remain positive throughout their weight loss journey.*

### Telling the Story

There may be obstacles along the way that block or slow participants' weight management journeys. And travelers may struggle to stay motivated when facing challenges and roadblocks one right after the other. Fortunately, tools and support are available to help clear the way and keep them on the right path.

### Empowering With Knowledge

Be prepared to discuss the following strategies for dietary changes<sup>20</sup>:

- Positive self-talk: The way people talk to themselves can impact how they feel and act. They should try to reframe negative thoughts from a positive perspective
- Get in touch with their appetite: Do they want food because they are hungry or to satisfy an emotional need? Recommend that they write a list of other things they can do to fulfill that need
- Assess physical hunger: With the Hunger-Satiety Rating Scale, aim to stay in the middle zones as much as possible
- Track progress: People with T2D should track not only the food they eat, but also how hungry they are and how they feel at the time
- Do not be afraid to reach out for help: This includes not only family and friends, but also support groups, therapy, and your healthcare teams

Be prepared to discuss the following strategies for physical activity<sup>21,22</sup>:

- Focus on successes: It does not matter how long it takes to achieve a goal as long as they are taking the steps to get there
- Plan ahead: Identify roadblocks and barriers so they can problem solve a route around them
- Find what works for each person: Internet-based interventions to promote physical activity may be more effective than usual care
- Switch it up: Add variety to their routine with different types of exercise along with their intensity, duration, and frequency
- Phone a friend: A workout buddy can help them stay committed to their exercise plans

### Guiding the Discussion

Have each participant speak to what is helping them to stay motivated, and have them write it down on their map. Share some of the strategies listed above to help those who have not yet found the strategies that work best for them. Remind the group that everyone's journey is different, and encourage everyone to keep trying out new motivational strategies leading up to the next session.

### End of Session 2



*Scene: Faced with additional roadblocks after overcoming many obstacles, the travelers search for motivation to continue their trek.*

## Session 3: Goal of 5%-10% Weight Reduction

*Remember that people with T2D may be under the impression that they need to achieve a dramatic weight loss before seeing any of the benefits. The goal of this piece is to help participants break down the math behind their weight loss goals and to provide motivation by highlighting the clinical benefits they may gain along the way.*

### Telling the Story

The goal of a weight management journey is not a location but is instead reaching a healthier physical and mental state. Each participant will reach this destination at their own pace, but all deserve the opportunity to celebrate and reflect on how far they have come.

### Empowering With Knowledge

Highlight how this outcome is possible using lifestyle programs that support a 500-750 kcal/day energy deficit to achieve a goal of losing 1-2 lb per week<sup>3,23</sup>:

- Approximately 1200-1500 kcal/day for women\*
- Approximately 1500-1800 kcal/day for men\*
- Personalized adjustments can be calculated using the [NIDDK Body Weight Planner](#)<sup>13</sup>

\*Adjusted for the individual's baseline body weight.

Discuss clinical benefits of modest and sustained weight loss among people with T2D and overweight/obesity<sup>3</sup>:

- Improved glycemic control, blood pressure, and lipids
- Reduced need for related medications
- Improved health-related quality of life
- Improved mobility and physical and sexual function

Give an example: For a 200-lb person, a 5%-10% weight loss is 10-20 lb.



### Guiding the Discussion

Welcome the group back, and allow them to share what goals they have achieved since the last session. Have participants record their successes on the group map using the stickers provided. Ask the group if they have noticed any improvements or health benefits yet, such as being able to walk longer without needing to stop to catch their breath. Guide the discussion to the benefits of different goals, starting with a 5%-10% weight loss. Have participants mark on the map where they are in relation to this goal.

### Reflecting in One-on-One Settings

The 4 states of change can be used to help assess a person's level of motivation and readiness when it comes to changing health habits. The 4 stages of changing<sup>5</sup> a health behavior are, in order, contemplation, preparation, action, and maintenance.

- **Maintenance: Do you have a new routine? Is it feasible long-term?**
  - Add variety with new foods, recipes, goals, physical activities, and rewards
  - Deal with unexpected setbacks; do not give up!
  - Challenge yourself by expanding your goals



## Mythbuster Activity

### What If You Stop Losing Weight or Hit a Plateau?<sup>23</sup>



*Hitting a plateau during weight loss can be highly discouraging to people with T2D and leave them feeling as though they have failed.*

*The goal of this piece is to bust this myth by educating participants on the fact that this is a normal bodily response during weight loss and that they can gain the cardiorespiratory benefits that come from increased physical activity even without losing weight. If a patient is not seeing results after 6 months of recommended changes, pharmacotherapy may be considered.*

#### Additional information

Help everyone understand that this plateau is because of the body's physiology.<sup>23</sup>

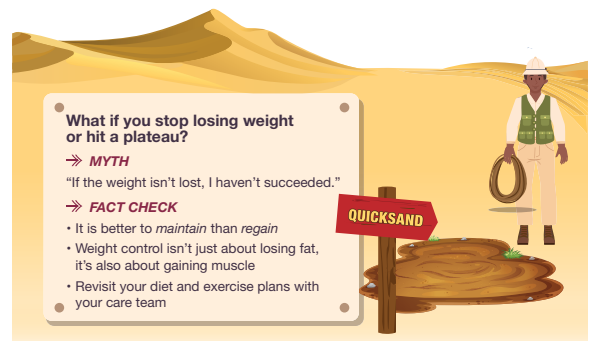
- After 6 months, the rate of weight loss usually declines and weight plateaus because energy requirements decrease as weight decreases
- To achieve additional weight loss, the individual must further decrease calories and/or increase physical activity
- At this point, the primary care practitioner should prioritize weight maintenance, the second phase of the weight loss effort

Explain to the group that it is better to maintain a moderate weight loss over a prolonged period than to regain from a marked weight loss.<sup>23</sup>

Encourage them by sharing that there is strong evidence that increased physical activity increases cardiorespiratory fitness, with or without weight loss.<sup>23</sup>

- Help the group reflect on the earlier discussion of the benefits they are already experiencing

Advise participants that if someone with T2D has not lost an average of 1 lb/week after 6 months of dietary changes, increased physical activity, and behavior therapy, then pharmacotherapy can be considered.<sup>23</sup>



*Scene: Travelers may feel like they are stuck in quicksand, not making progress. A team is there to pull them out and help them continue their journey.*

### Session 3: Goal of >10% Weight Reduction<sup>1,3</sup>

Some people with T2D may be good candidates for more intensive weight loss. The goal of this piece is to help you assess who could benefit from a greater reduction in weight and educate them on why this might be right for them.

#### Telling the Story

Weight management journeys do not have a singular destination. While a 5%-10% reduction may be a comfortable landing spot for some people, it may only be a transitory goal for others. This next leg of the journey is for those who would benefit from continuing to reach a more intensive goal.

#### Empowering With Knowledge

Inform the group that the benefits of weight loss are progressive.

- Data from a post hoc analysis of the Look AHEAD trial suggests that those who achieved >10% weight loss through intensive lifestyle intervention had improvement in cardiovascular outcomes as compared to those who did not receive an intensive lifestyle intervention<sup>3</sup>

Explain the situations in which more intensive weight loss goals (eg, >5%, >7%, >15%) may be pursued<sup>3</sup>:

- It is needed to achieve further health improvements
- The person is more motivated
- More intensive goals can be feasibly and safely attained

If appropriate, advise on the short-term intensive dietary intervention that can be provided by trained practitioners in medical settings with ongoing monitoring.<sup>3</sup>

- Structured very low-calorie diets, typically 800-1000 kcal/day, using high-protein foods and meal replacement products may be used
- The intervention may increase the pace and/or magnitude of initial weight loss and glycemic improvements when integrated with behavioral support and counseling
- Intensive intervention is an option for those who require further weight loss, glycemic improvements, or weight loss prior to surgery

#### Guiding the Discussion

Using the information provided above, talk about the benefits of more intensive weight loss with the group. Have each participant reflect on their personal map, and discuss with each person whether they think they are ready to strive for a new goal. If so, ask them to write down and discuss strategies for this next part of the journey.



*Scene: The travelers read about a new waystation that sounds like a better fit for them, and so they contemplate how to get there.*

## Session 3: Why Might You Be Regaining Weight?

People with T2D may not realize that the journey does not end at weight loss, but instead transitions into weight maintenance. The goal of this piece is to educate participants on what is happening in their bodies that may be contributing to weight regain and emphasize the importance of continued behavioral interventions in weight maintenance.

### Telling the Story

Similar to how a sweltering, exhausted traveler might feel toward the end of their desert trek, people with T2D may feel discouraged and despondent when weight loss progress begins to stall or even reverts to weight regain. Remind them that this is a normal part of their body's journey and that they should not shoulder any blame or stigma.

### Empowering With Knowledge



Ask by show of hands who has experienced regaining weight after being on a diet in the past. Describe why that happens based on physiology using the **Energy Gap handout**, and explain why behavioral changes are more successful than diets.

Explain the physiological changes that result from the initial weight loss that can contribute to weight regain<sup>14</sup>:

- A decrease in noticeable satiety “feeling full” signals
- An increase in noticeable hunger signals
- An increase in metabolic efficiency
- An increase of contractile efficiency in skeletal muscles

Highlight how long-term follow-up shows a return to baseline weight for most people in the absence of continued behavioral intervention.<sup>23</sup>

- A weight loss or weight maintenance program can be conducted by a practitioner without specialization in weight loss<sup>23</sup>

### Guiding the Discussion

Discuss with the group how they can overcome this challenge and what strategies they have used to avoid weight regain. Have each participant note their strategies on the map and share with the group.



*Scene: The traveler, sweltering and exhausted, is discouraged from feeling the relentless heat of the long journey.*

## Session 3: How to Keep Moving Forward!

Often, attention is focused on weight loss, leaving people with T2D uninformed about recommendations and available resources for weight maintenance. The goal of this piece is to educate participants on what to look for in a weight maintenance program and the benefits of support systems. This piece also serves as a reminder to clinicians that a positive attitude from all HCPs is crucial to a patient's success, and monthly visits, at a minimum, are recommended.

### Telling the Story

When overcoming obstacles, it is helpful to remember that there are resources that can help them. Just like how in the desert heat, relief may come in the form of a cool oasis, in a weight management journey, people with T2D can turn to their support systems for relief.

### Empowering With Knowledge

Educate the group on available weight maintenance programs.<sup>3</sup>

- For those who have achieved weight loss goals long-term ( $\geq 1$  year)
- Monthly contact and support
- Ongoing monitoring of body weight (at least weekly) and regular physical activity (200-300 minutes/week)
- Internet-based programs, which can also provide structure and repeated contact<sup>21</sup>

Encourage people with T2D to take advantage of a multidisciplinary healthcare team, which can include a physician with pharmacotherapy expertise, nurse and/or nurse practitioner, dietitian, exercise physiologist, and psychologist.<sup>17</sup>

- A positive attitude of support and encouragement from all HCPs is crucial to continuing success<sup>23</sup>
- During active weight loss, recommend  $\geq 1$  visit per month with an HCP for the purposes of reinforcement, encouragement, and monitoring<sup>23</sup>

Remind people with T2D to reach out to their social support systems.

- Behavioral lifestyle intervention approaches targeting both enrolled participants and their social support persons may enhance weight loss for both parties<sup>9</sup>
- Lifestyle changes made by individuals can have a “ripple effect” through their social systems<sup>9</sup>
- Group exercise classes or working out with a friend add accountability and enjoyment<sup>21</sup>

### Guiding the Discussion



To facilitate discussion, use the **Tips and Tricks Cards**. Have participants fill out 3 cards each with strategies that have helped them to keep moving forward. Then put all the cards on the table, and let each participant choose 2 cards that they believe could work well for them. You may also choose to include some pre-filled cards with strategies you think would benefit the group. Then, prompt the group to discuss their cards with one another. Allow participants to negotiate for cards that they think would work better for them and make exchanges, as if they were in a desert bazaar, for 3 rounds. Afterwards, have each participant share and record 1 or 2 tips and tricks that they would like to implement moving forward.



*Scene: By moving forward, the travelers pass through an oasis, where they find refuge and support to continue with their journey.*

## Session 3: Goal Is Consolidating and Maintaining Weight Loss

*People with T2D may be nervous to leave behind the structure provided by this support group. The goal of this piece is to give them the confidence that they can take everything they have learned so far and apply it successfully going forward.*

### Telling the Story

Ending one journey and beginning another one can be exciting and daunting all at once for travelers.

### Empowering With Knowledge

The longer the weight maintenance phase can be sustained, the better the prospects for long-term success in weight loss.<sup>23</sup>



*Scene: After successfully navigating through the harsh desert, the travelers reach their destination, where a new journey awaits them.*

### Guiding the Discussion

Summarize the 3 sessions, and acknowledge the successes of each member of the group. Congratulate them on making these big changes, and give them confidence in the next steps. Ensure that they have access to any resources they may need to continue their journey and to start looking toward bright new futures.

### End of Session 3

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