

## New study addresses barriers to physical activity counseling

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Lack of time, knowledge and training in health promotion and lack of success with changing patient behavior were among the top barriers to including effective physical activity counseling in the primary care setting, according to research by The University of Texas School of Public Health, part of The University of Texas Health Science Center at Houston (UTHealth).

"Individual and organization barriers must be addressed in order to incorporate counseling effectively," said Emily Hebert, M.P.H., the study's lead author and doctoral candidate at The University of Texas School of Public [Health](#) Austin Regional Campus, part of UTHealth. "Although these barriers may hinder a [primary care](#) provider to provide counseling, there are licensed counselors and health professionals who could work with the physicians to help patients achieve their goals."

The article is published in the July issue of the [British Journal of Sports Medicine](#).

Physical activity counseling is considered advice and discussion to encourage patients to increase and maintain physical activity.. The U.S. Department of Health and Human Services' (HHS) Healthy People 2020 initiative recommends physicians provide intensive physical activity counseling and [behavioral interventions](#) to patients with chronic conditions such as cardiovascular disease and diabetes.

It is estimated that only 30 to 50 percent of U.S. physicians regularly

provide counseling on physical activity to their patients, according to the article. Research has shown that physical activity reduces the risk of all-cause mortality, [coronary heart disease](#), hypertension, type 2 diabetes, certain cancers and other [chronic conditions](#).

"Evidence suggests that the most effective counseling includes more than just telling the patient they need to exercise or that exercise is important," said Hebert. "Use of evidence-based counseling methods and strategies as well as following up with patients could help with decreasing a patient's weight or reduce their chance of developing a chronic disease due to their lack of physical activity."

The article also states providers are uncertain about the effectiveness of their counseling and feel they can only provide general advice about the importance of physical activity due to their lack of training in health promotion.

Recent studies suggest there may be some short-term benefits to counseling but the long-term impact remains uncertain, according to the article.

According to data from the Centers for Disease Control and Prevention's National Health and Nutritional Examination Survey, less than 5 percent of U.S. adults meet the recommended amount of physical activity. The HHS recommends at least 150 minutes of physical activity a week.

Physical activity counseling has had varying levels of success in the primary care setting, according to the article. Hebert hopes the review will help future interventions address issues that potentially limit their effectiveness.

"Insufficient physical activity is an independent risk factor for numerous chronic diseases, such as obesity and [type 2 diabetes](#) and premature

death," said Kerem Shuval, Ph.D., assistant professor of epidemiology, human genetics and environmental sciences at the UT School of Public Health Dallas Regional Campus. "Primary care providers have the potential to play a key role in promoting physical activity among their patients; however numerous barriers hinder their ability to do so. This article summarizes barriers providers encounter during clinical practice and this systematic review may be utilized as a platform when designing [physical activity](#) interventions in primary care." Shuval served as Hebert's thesis adviser for the article.

Hebert reviewed 19 articles to summarize the perceptions and attitudes of primary care providers, as well as barriers to counseling. Physicians, primary care nurses and nurse practitioners were among the providers mentioned in the reviewed studies.

Lack of financial incentive/reimbursement for counseling was also listed as a barrier by primary care professionals in the study, which reviewed articles from 1991 to 2011. In November 2011, the Centers for Medicare & Medicaid Services announced that Medicare would add coverage for preventive services to reduce obesity, which includes counseling to promote weight loss through high intensity interventions on exercise and diet. Certain restrictions and guidelines must be followed in order for the primary care provider to receive reimbursement.

Providers also cited lack of training/knowledge of effective health promotion strategies as a barrier to their efforts. Hebert said incorporating health promotion counseling in medical school curriculum could help improve knowledge. "This could be incorporated through web-based courses, discussion of counseling in grand rounds or noon lectures, and mini-clinical exam evaluations."

In addition, providers were more likely to provide counseling if the patient had cardiovascular disease symptoms, were obese or had

hypertension or if the provider was active themselves.

Provided by University of Texas Health Science Center at Houston

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