

## Program taught in American Sign Language helps deaf achieve healthier weight

## March 19 2014

A group of deaf adults using American Sign Language in a healthy lifestyle program successfully lost weight, according to a study presented at the American Heart Association's Epidemiology & Prevention/Nutrition, Physical Activity & Metabolism Scientific Sessions 2014.

In the first randomized trial of lifestyle modification or weight reduction with <u>deaf</u> people using American Sign Language (ASL), participants had moderate improvements in their weight and level of physical activity after a 16-week program.

"Existing mainstream programs focused on weight and weight-related behaviors are often inaccessible to the deaf community," said Steven Barnett, M.D., lead author of the study and associate professor of family medicine and public health sciences at the University of Rochester in New York. "Collaboration with deaf ASL users is essential to develop accessible and culturally appropriate programs."

In partnership with the deaf community in Rochester, the researchers adapted a healthy lifestyle program shown to be effective in hearing people.

A previous study, using accessible public health surveillance in Rochester, found that obesity (body mass index or BMI > 30) is more prevalent in the local deaf community than in the general population – slightly more than 34 percent of the deaf people were obese, compared



to nearly 27 percent in the general population.

In the Deaf Weight Wise trial, 104 overweight or obese participants were either enrolled in the <u>healthy lifestyle</u> program, with weekly 2-hour group sessions, or assigned to a delayed group who would receive the intervention later.

For the group sessions, counselors used motivational interviewing techniques to encourage lifestyle change and help participants develop strategies to maintain healthy eating, such as in social situations and during stress. They were encouraged to exercise at least 150 minutes per week.

After six months, participants in the intervention group had lost 7.4 pounds more and reduced their BMI 1.35 points more than the delayed group. Most of the intervention group's participants (58.3 percent) lost at least 5 percent of their baseline weight, compared with 14.3 percent of the delayed group.

Researchers will continue to follow participants for 24 months.

"During program development and during the trial, deaf community members emphasized the importance of having deaf counselors," said Barnett, who directs the Rochester Prevention Research Center: National Center for Deaf Health Research. "I realize this is not possible to implement everywhere at present. We are working on program adaptations to address access to counselors who are deaf ASL users."

Lori DeWindt, M.A., a member of the Deaf Weight Wise Study Group and a Deaf Weight Wise counselor, said, "Participants were comfortable in the culturally affirming environment in which everyone signs. This setting, along with accessible information and peer support, contributed to the positive experience of participants."



## Provided by American Heart Association

Citation: Program taught in American Sign Language helps deaf achieve healthier weight (2014, March 19) retrieved 6 May 2024 from <a href="https://medicalxpress.com/news/2014-03-taught-american-language-deaf-healthier.html">https://medicalxpress.com/news/2014-03-taught-american-language-deaf-healthier.html</a>

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