

Health coaching paired with gym membership works best for obese people with mental illness

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A health promotion program, called In SHAPE, specifically designed for people with serious mental illness, produced more fit participants and significant weight loss than a control group where participants only received a gym membership.

The results of a [randomized clinical trial](#), published in the Dec. 12 *American Journal of Psychiatry*, Dr. Stephen Bartels of Dartmouth and colleagues showed that more than half the participants in the In SHAPE group achieved clinically significant reduction in cardiovascular risk. These positive outcomes were maintained six months after the In SHAPE program ended.

"Upwards of 80 percent of people with serious [mental illness](#) are overweight or obese, and rates of obesity among people with serious mental illness are nearly double the rate within the general population, which represents an alarming public health concern," said Bartels of the Dartmouth Centers for Health and Aging.

In SHAPE is a 12-month health promotion program consisting of a [gym membership](#) and a health promotion coach for people with serious mental illness. Participants have weekly individual meetings with their coach who is trained as a personal fitness trainer and who has received instruction in healthy eating and nutrition.

The health promotion coach is a key component of the In SHAPE program. The instructors receive one-week training where they receive instruction in motivational interviewing, fitness goal setting, healthy nutrition, strategies for health behavior change, and tracking eating and physical activity behaviors.

The In SHAPE program was first developed in 2004 in New Hampshire and has been previously evaluated in a 2013 randomized controlled trial.

This replication study achieved results comparable to the 2013 randomized control trial, which showed 49 percent reduction in cardiovascular risk in In SHAPE participants with serious mental illness within a community mental health center in a predominantly white setting in New Hampshire.

The current study demonstrated that the In SHAPE program achieved and exceeded the same clinically meaningful benefits across multiple community mental health providers, in greater Boston, MA, and within an ethnically heterogeneous sample where 46 percent of participants were nonwhite.

This is important in behavioral health research because it is very challenging to replicate study results across different settings.

One of the main surprises of the study was the finding of maintenance of clinically significant reductions in [cardiovascular risk](#) six months after the intervention was removed. (Cardiovascular risk is defined as clinically meaningful [weight loss](#) of 5 percent or more or clinically significant improved fitness.) Another surprise was that the findings replicated and exceeded the positive findings of a prior randomized controlled trial of this same intervention.

A limitation of this study is that the sample size was not large enough

(210 participants) to determine whether there were differences in weight loss between different psychiatric diagnoses or between different racial or ethnic groups.

In this study, serious mental illness included schizophrenia, schizoaffective disorder, bipolar disorder, or major depressive disorder.

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