

Eat Smart, Move More, Weigh Less Is **Evidence-Based**



Dunn C, Olabode-Dada O, Whetstone L, Thomas C, Aggarwal S, Nordby K, Thompson S, Johnson M. Mindful eating and weight loss, results from a randomized trial. *J Fam Med Community Health*. 2018; 5(3): 1152.

MAIN FINDINGS: Participants who completed Eat Smart, Move More,

Weigh Less had a significantly larger increase in their mindfulness scores than those in the waitlist control group. Study results suggest that there is a beneficial association between mindful eating and weight loss.



Dailey R, Romo L, Myer S, Thomas C, Aggarwal S, Nordby K, Johnson M, Dunn C. The Buddy Benefit: Increasing the Effectiveness of an Employee-Targeted Weight-Loss Program Through Communication. Journal of Health Communication. 2018;23(3):272-280.

MAIN FINDINGS:

Participants who found a caring, attentive "buddy" that encouraged them to keep their goals were more likely to reduce their BMI and waist size while participating in the Eat Smart, Move More, Weigh Less program.



Thompson S, Dunn C, Aggarwal S, Tchwenko S, Wang A, Rushing J, Thomas C, Nordby K, Allison C. Behaviors predictive of weight loss maintenance: Six-month follow up of an online weight management program. *Obes Open Access*. 2016;2(3).

MAIN FINDINGS: The

program implements evidence-based behaviors associated with weight loss maintenance, including limiting portion sizes, eating vegetables, and mindfulness of healthy eating and physical activity.

Original Article CUNCAL TINUS IND INIUSTICATIONS	Obesi
Using Synchronous Distance En Loss Intervention: A Randomize	
Carolyn Dann ¹ , Olucola Olabodo Dada ² , Lauren Wheterow ¹ , C Somuel 'Diompson ² , Madison Joheson ² , and Oristne Alloon ⁴	athy Thomas ² , Sarabhi Aggarwal ⁴ , Kelly Nordby ¹ ,
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Introduction Dorsceigt and obvity are arguidy, the number one public holds into of our time with 40% of adults with a body mass index (000), 25% (1). The printy assess related to resrectful and devises is the bable shat by proc. Normelytic and devise juscess the risk of charactic diseases, including batter disease, toxice, and type 2 dis- bases. Overviety and and where y are solicidated with higher methoding and monthly mess and lower queling of life (2).	The need for general senses to wingle has pergenn has pergen researches to equivalence for our of the lasticus, which could have wider strept (3). Scienti technologies have how strend include assumed reapper boolines, forthick thereafter model include assumed reapper boolines, forthick thereafter model and could, the paper boolines with a dempitie, participant low to a low of a half-baland withins, catalogue models and output to the paper based inacrossite and the size and the strength issues and lower lower of a weight molerance and multile weight issues and lower lower of the significant strength within spaces inacrossition 14.5%.
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Dunn C, Olabode-Dada O, Whetstone L, Thomas C, Aggarwal S, Nordby K, Thompson S, Johnson M, Allison C. Using synchronous distance education to deliver a weight loss intervention: a randomized trial. *Obesity*. 2016;24(1):44-50.

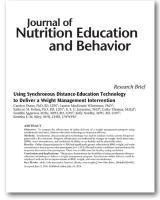
MAIN FINDINGS:

Participants who completed

the program lost significantly more weight than those in the wait-list control group and had a greater reduction in BMI. Weight loss was maintained at 6 months.



North Carolina Public Health Working for a healthier and safer North Carolina Everywhere. Everyday. Everybody.



Dunn C, Whetstone LM, Kolasa KM, Jayaratne KSU, Thomas C, Aggarwal S, Nordby K, Riley K. Using synchronous distanceeducation technology to deliver a weight management intervention. *JNEB*. 2014;46(6):602-609.

MAIN FINDINGS: The program, delivered in real-

time, online distance education format supported with personalized e-mail, expands the reach of nonclinical weight management. The online delivery produces similar impacts when compared to in-person delivery and achieves positive outcomes related to weight, healthy eating, physical activity behaviors and has the potential to reduce health care costs.



Dunn C, Whetstone LM, Kolasa KM, Jayaratne KSU, Thomas C, Aggarwal S, Herget C, Rogers AB. Delivering a behavior-change weight management program to teachers and state employees in North Carolina. *Am J Health Prom.* 2013;27(6):378-383.

MAIN FINDINGS: The program demonstrates the feasibility of implementing a behavior change-based weight management program at the worksite to achieve positive outcomes related to weight, blood pressure, healthy eating and physical activity behaviors and has the potential to reduce health care costs.



Dunn C, Kolasa K, Vodicka S, Schneider L, Thomas C, Smith C, Lackey C. Eat Smart, Move More, Weigh Less a weight management program for adults—revision of curriculum based on first-year pilot. *J of Extension*. 2011;49(6):6TOT9.

MAIN FINDINGS: The program uses the Theory

of Planned Behavior and strategies identified in the professional literature that are associated with healthy eating, physical activity, and achieving and maintaining a healthy weight.



Whetstone L, Kolasa K, Dunn C, Jayaratne J, Vodicka S, Schneider L, Thomas C, vanStaveren M, Aggarwal S, Lackey C. Effects of a behaviorbased weight management program delivered through a state cooperative extension and local public health department network, North Carolina, 2008–2009.

Preventing Chronic Disease. 2011;8(4):A81: www.cdc.gov/pcd/issues/2011/jul/10_0160.htm.

MAIN FINDINGS: Eat Smart, Move More, Weigh Less is an effective weight management program that is associated with decreased weight and increased confidence in healthy eating and physical activity.

Establishing Worksite Wellness Programs for North Carolina Government Employees, 2008		
Stegenstel einsteine für tils orticle Vinnig St, Hallader J, Phonis M, Henget C, Dana C, Establishing wurknisse verli- men programm für Nach Canadra geweinnen enspilyner (2008: Proc Channis Die 2011;582). http://www.ole.gov/publi ionstr/2011/ana/10_0003/km. Anaessed [dots]. PRESERVEND Abstract	Outronse The static's first worksite wellsens policy control enployee wellsens in static prevenues a addressed administrature harvies to allow effective sos side wellsens informediant. For example, the policy to pikt implementation of a subsidiard worksite wei- management program. Parkies awails of the prog- helped generate legislation support to requark the weip management programs. Therefore such as other pro- management programs. Therefore and the weip management programs. Therefore and the generator.	
Abstract	Interpretation	
Background State roughges health plans constinues precide worksite willness programm to reduce the pertubation of downine diseases among their members, but four offse the compre- hensive range of interventions recommended by the Task Fore- on Community Devention Services.	Stong interagency partnership is essential to guide no site willness policy and program development in state p remnants. State backth plans, public heath appendes, prevenant agencies each play a role in that partnership	
Community Context	Background	
Community Contexts North Canolina's State Health Plan for Teachers and State Engloyees provides health ourwage for approxi- match (05:500 state engloyees, tankness, moleces, and dependenci. Health chains indicate that the prevalence of having at least 1 chronic disease or of heing obes is approximately 22% among state employees.	One objective of Healthy Popule 2019 was for at least 2 of workships to offer comprehensive worksize wells programs for their employees (1). Worksize programs part of a public health strategy to address the issues in choosis discusses, which are predicted to not the health care system an estimated 31.2 trillies answe to 2022 (2). The Tark Force on Community Proceed	
Methods 10% State Hochh Pian erented a partnevship with North Cambian's Devices of Phalics Health, Office of State- Presented, and stellar being starting species to identify its neuronic distantions to previding workship wellaws programs of the molphysical and to device a state pulpy by address them. The Workson of Pathie Health established a another wellaws mildra wolf with wellaws microwerians.	Societies the control table is the state of the state of the sample-baseline variable with the spectra of the state of the assumption of the state of the state of the state of the 4 stategories is some these that and a videous-based interve isom in help supplyrus, have wight, increase physi- atticity, reduce tabases may and have better access influences accession (a).	

Young S, Halladay J, Plescia M, Herget C, Dunn C. Establishing worksite wellness programs for North Carolina government employees, 2008. *Preventing Chronic Disease.* 2011;8(2):A48: www.cdc. gov/pcd/issues/2011/ mar/10_0069.htm.

MAIN FINDINGS:

Partnerships are essential to guide worksite wellness programs. State health plans and public health agencies each play a role.

