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**MOTIVATION AND THE DIETITIAN: DIETITIANS MUST
INCREASE THEIR EFFORTS TO MOTIVATE AND BRING
ABOUT LONG-TERM SUCCESS IN THEIR CLIENTS**

by

Cory Ann Hansen

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Motivation and the Dietitian: Dietitians must
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long-term success in their clients.

“motivation, change, nutrition, behavior”

Word Counts

Abstract

Text

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Motivation and the Dietitian:

Dietitians must increase their efforts to motivate and bring about long-term success in their clients.

Abstract

Perhaps the most difficult aspect of a dietitian's job is motivating clients to make necessary changes in their lives to benefit their health. Although most people are capable of enduring short-term attempts at healthy living, a lifetime of appropriate dietary habits is difficult for virtually everyone. One of the greatest challenges of long-term success is a lack of motivation. This signifies that it is not skills or knowledge that people lack in general. Therefore, dietitians must focus part of their efforts on motivation rather than simply teaching people what they need to do. Methods that have been found to be helpful in promoting motivation and long-term success include an individualized approach, early detection and interventions, ongoing care, follow-ups, support aids, connecting with clients on a more personal level, designing small steps, and utilizing a counseling-based rather than skill-based approach. By utilizing these various methods, dietitians can maximize their abilities to help clients make changes that last for a lifetime.

Motivation and the Dietitian: Dietitians must increase their efforts to motivate and bring about long-term success in their clients.

Introduction: Role and Impact of Dietitians

One of the most important roles of the dietitian goes beyond simply teaching the facts of healthy living and incorporates facilitating new and improved behaviors in the lives of clients. While the dietitian's vast knowledge of how the body works and how food can help it function optimally may seem impressive to many clients, if it does not help them make changes in their lives, the efforts were made in vain. A dietitian must find a way to help each of her clients actually implement her teachings into their lives on an individualized basis. In addition to staying abreast on nutritional topics, it is critical that dietitians also study effective methods to facilitate change in others. Although dietitians do help people, they have the potential to be much more influential.

Current data supports the role of the dietitian in improving the overall care given to patients in the healthcare setting. For example, Bowerman and colleagues (1) found that a 10-minute intervention delivered by a primary care physician coupled with individual dietary counseling sessions delivered by Registered Dietitians was effective in achieving weight loss over the course of 52 weeks. Hebert and colleagues (2) found that while group-based and dietitian-led nutrition education programs led to decreased fat intake and body mass, mindfulness-based stress reduction clinic programs and usual supportive care did not lead to either of these two successes. Rais-Keely (3) concluded that education and nutritional intervention play important roles in preventing and delaying the progression of renal disease in persons with diabetes. Paul (4) states that

nutrition is considered the most critical and pivotal component of diabetes care in achieving blood glucose goals. He also recognizes that an increased emphasis on individualized nutrition therapy and the dietitian as a true partner in diabetes care, research, and management has been observed. However, he also notes that the major challenge facing people with diabetes is the need for behavioral changes. It is important to realize that the major challenge is not a lack of knowledge or resources; it is behavioral challenges. As a result, advances in nutrition therapy now center on methods to influence and improve these behavioral changes. Access to nutrition therapy and self-management training is critical to improve clinical outcomes and reduce health care costs otherwise spent on clinic visits, expensive medications, emergency room visits, and hospitalizations (4).

Long-term Impacts of Dietitians

Despite powerful findings in support of dietetic professionals, there is still plenty of less favorable evidence. Although data support short-term progress due to dietitian interventions, they do not show long-term maintenance of this success (5, 6, 7). Ash and colleagues (6) found that although short-term progress was observed after intense dietary therapy, none of the progress was maintained at an 18-month follow-up check-up. Ness and colleagues (7) concluded that dietary advice among men aged 37-70 led to only modest improvements in long-term dietary behavior. Copperman and Jacobson believe that frequent and long-term monitoring by a Registered Dietitian and pediatrician is needed to reinforce lifestyle changes and support the achievement of realistic goals of weight loss and/or maintenance. However, even if continual meetings with a dietitian are

successful, it may be impractical for the majority of people to have the means to meet with and pay for a dietitian on a long-term basis. Obviously, with long-term success being so difficult, changes and improvements must be made in the field of dietetics. The underlying issue here is that dietitians have the potential to make much more significant and permanent changes in people's lives. Their impact can be optimized by discovering and utilizing methods beyond the simple provision of information.

How Dietitians Can Improve Facilitation of Change

Although research has not been able to clearly define any specific methods or interventions that are consistently effective for all patients, there are trends that can point health professionals to areas where success is more likely to occur. An individualized approach is one such strategy that is widely supported. Katz and colleagues (8) found that individualized counseling-based interventions cost less and were more effective in achieving weight loss than group-based skill-building interventions. Clients need and deserve this one-on-one approach. Therefore, it becomes the job of the dietitian to explore a variety of methods and use her clinical judgment to design the best individual plan possible for each of her clients.

Another method that leads to greater success of the clients is early detection and intervention (3). In other words, dietitians should focus on prevention efforts in addition to treatment efforts. Aiding people in realizing the importance of good nutrition early in life is invaluable, which is why a significant role of the community dietitian is to help people at the earliest time possible. Another issue related to early detection and intervention is the finding by Burge and colleagues (9) that poor health status can be a

barrier to, rather than a motivator for, treatment adherence. If people are more likely to comply when they feel good, it is imperative that healthy habits begin early.

Another way to improve long-term success is through ongoing care (10,11).

Living healthfully is a lifelong effort. People should not be expected to learn all they need to know in a few sessions with a dietitian and then apply these teachings for the rest of their lives. Dietitians should make the effort to follow-up with patients and continue to provide quality care as needed and where feasible. Maintaining high levels of adherence is difficult and requires additional support in most instances (2). Support aids can stem from individual meetings or group booster sessions with the dietitian (2). Involving significant others (2) as well as the primary care physician (1) is a great way to amplify the provision of this support. Additional promising intervention strategies according to current research include connecting with patients, taking small steps, and using a counseling-based rather than skill-based approach.

Counseling Approaches

If the dietitian is willing to put forth enough effort, many of these strategies are self-explanatory and can be accomplished and improved upon over time. The more difficult and less obvious approach is trying to actually counsel people rather than simply telling them about various skills and habits they should develop. With this approach, the dietitian applies certain counseling methods when teaching interventions in order to be more effective. To make this process possible, there is a plethora of resources available to help dietitians understand and practice various ways to help their clients. Bauer and Sokolik (12) explore several counseling and behavioral change approaches. The

counseling approaches include person-centered, behavioral, gestalt, cognitive, family, and solution-focused therapies as well as multicultural counseling. Cramer (13) states that although the factors responsible for the beneficial effects of various treatments remain to be discovered, the most influential counseling approaches are behavioral, cognitive-behavioral, psychodynamic and person-centered treatments. Rimes and colleagues (14) found that a cognitive-behavioral model of health anxiety counseling led to anxiety reduction among people who had a general tendency to worry about their health. Otero (15) suggested that cognitive-behavioral approaches could be a reasonable option in smoking cessation therapy. Browne and colleagues (16) stated that solution-focused approaches to interviewing and counseling provide effective, client-centered, respectful ways of discussing tobacco reduction with disadvantaged clients and positively impacting their sense of self-efficacy regarding tobacco reduction. In other words, there are many counseling approaches available that have been shown to be successful. It is critical that dietitians study, practice, and utilize these methods in appropriate settings.

Behavioral Change Models

In addition to these counseling approaches, Bauer and Sokolik (12) also describe the following behavioral change models: self-efficacy, health belief model, locus of control, social cognitive and social learning theory, transtheoretical model, motivational interviewing, and health behavior change method. Many of these approaches have proven promising according to current research. Hacker and colleagues (17) have found the transtheoretical model to be effective in adolescent reproductive health counseling.

Hacker concludes that this behavioral approach should be acknowledged for effective counseling and change to take place (17). Hancock and colleagues (18) explore the theory of motivational interviewing. They describe it as a client-centered, directive counseling approach aimed at promoting motivation in clients to change certain behaviors. Hancock states that its effect is to reduce defensiveness and promote disclosure, engagement, and participation, thereby motivating the client to make behavioral changes. These effects all make sense when related to dietetic counseling. Promoting disclosure is a great way to be able to help people. Often times, people may feel intimidated by a dietitian and not share their dietary and activity habits as honestly as possible, which inhibits the dietitian's effectiveness. The more disclosure that takes place, the more the dietitian understands and can help. Additionally, when the client is engaged and participating, self-motivation is much more likely to result. Overall, these various behavioral approaches help the dietitian understand how to achieve long-term success. Helping people to change is more complicated than simply telling them what to do and how to do it. By following behavior change model or approaches, dietitians are more likely to fulfill their potential of more heavily impacting the clients' lives.

Helpful Tools

To make dietitian sessions more effective, a variety of tools have been developed to facilitate the use of various counseling and behavioral change strategies. Capra and colleagues (10) state that assessment tools such as the Patient-Generated Subjective Global Assessment are useful in terms of identifying patients with nutrition issues and guiding intervention. Knowing as much as possible about a client's background can help

facilitate appropriate education. Assessment tools can help clients recall and express various aspects of their lives. This is an important way to identify possible barriers so that both the client and dietitian can work together at preparing for them and overcoming them. Assessments also allow the dietitian to design the intensity of the approach. Quality of life should always be considered, as it is not appropriate for every client to work towards extreme goals. Basically, the more information the dietitian has, the better care the clients receive. However, a client should not be asked to share private information. The best way to differentiate between information that will lead to better service for the client as opposed to information that should be kept confidential is for the dietitian to have the client's best interest in mind at all times.

Obtaining helpful information about clients is discussed in Bauer's and Sokolik's (12) compilation of forms. For example, their Assessment Ruler worksheet can be used to define readiness to change, adherence to dietary goals, confidence in making lifestyle changes, and the degree of importance for making a lifestyle change. This tool helps the dietitian to better understand the desires and abilities of clients. Then, the dietitian can better assist the client in making appropriate goals. Under- or over- challenging clients will not lead to success. Other helpful data collection tools include the Client Assessment Questionnaire, Food Group Feedback Form, Client Concerns and Strengths Log, Eating Behavior Journal, Counseling Agreement, Stress Awareness Journal, and Physical Activity Medical Readiness Form. With these tools, a dietitian can have a much clearer picture of her clients' lives, which leads to improved quality of care and success for the clients.

Beyond the Counseling Strategies

Although counseling strategies are a necessary aspect of client motivation and success, other aspects of the intervention cannot be dismissed. No matter how motivated a person is, he or she cannot use that motivation to improve life if the knowledge and skills of what to do are lacking. In addition to motivating, the dietitian must still teach what the client needs to do as well as how and why. In fact, education level and confidence can actually contribute to adherence (9). Patient satisfaction is another way to improve compliance (9). If clients are happy with the information they receive as well as the way they receive it, adherence increases. This means that melding quality education with personal counseling may be the key to reversing a lack of compliance among individuals needing to improve their health. In other words, the message and the messenger both hold great importance. Both have to be appropriate, timely, and of high quality.

Refocus on Motivation

Perhaps the most difficult aspect of motivation is that it must come from within a person rather than from external forces. In fact, the definition of motivation is the psychological feature that arouses action toward a desired goal. In other words, motivation is the reason an action takes place. It gives purpose and direction to behavior, but must come from within. Since motivation is psychological, it cannot be given to someone. Although external forces may help stimulate motivation, the ultimate source to create motivation lies with a person. Thorgeresen and Ntoumanis (19) discuss this issue of motivation in the context of self-determination theory. Their analyses support their

hypotheses that intrinsic motivation and identified regulation are predictive of more adaptive behavioral, cognitive and physical self-evaluation patterns than external regulation and motivation. Additionally, the exercisers in their study who were in the maintenance stage of change displayed significantly more self-determined motivation to exercise than those in the preparation and action stages. As a result of their research, they identified the importance of promoting self-determined motivation in exercisers to improve the quality of their experiences, as well as to foster their exercise behavior (19). When a client is equipped with this self-motivation, actions or changes are much more likely to take place. Hence, the role of the dietitian is difficult. In addition to focusing on necessary knowledge and behavioral changes, the dietitian, as an external agent, must attempt to arouse intrinsic motivation in the client.

Since the dietitian cannot directly create intrinsic motivation, he or she must focus on external ways to enhance motivation in an attempt to indirectly facilitate motivation to come from within a person. A number of factors have been shown to have a role in motivation. Herzberg's and colleagues' (20) "motivation-hygiene" theory proposes certain factors that can affect job satisfaction and dissatisfaction. The example is given that although better on-the-job performance may increase motivation, work overload can become a demotivator. Developing equal levels of authority and responsibility, re-engineering of jobs so that work remains meaningful, and providing appropriate recognition and opportunities for promotion and personal growth may help maintain motivation. Although some of these examples do not relate directly to a counseling dietitian, they can be modified to be more helpful. Better on-the-job performance can be compared to improved daily habits such as exercise and healthy eating. Work overload is

relatable to making clients work too hard to achieve certain goals or incorporate certain behavioral changes into their lives. Equal authority and responsibility can be obtained by helping clients to see their role versus the roles of health care professionals and even pharmaceuticals. Re-engineering of jobs symbolizes the need to help people create variety in their daily activity and food intake as well as motivation factors. Appropriate recognition is easily achieved by congratulating clients for their progress and perhaps even having them reward themselves or simply journal their thoughts of accomplishment. Finally, opportunities for promotion and personal growth can be achieved by constantly challenging the client to make and reach for new goals. To state these ideas more concisely, the dietitian's role is to find out what motivates their clients and get them started with a few ideas until they can find their own intrinsic sources of motivation. The better the dietitian can relate to the client and the client can have trust and confidence in the dietitian, the more likely the client will eventually achieve goals. However, the client must ultimately realize that he or she is responsible for the motivation and the dietitian is simply a supporting agent.

As was already mentioned, motivational interviewing is another helpful technique. It is a client-centered, directive counseling approach aimed at promoting motivation (18). The mechanisms behind this theory shed more light on this concept of helping clients motivate themselves. Being a client-centered approach shows the need to emphasize individualized care to every client. Also, since this technique facilitates engagement and participation, it seems more likely that clients will discover intrinsic motivation. People must feel they are important to their dietitian as well as themselves.

By both parties being heavily involved in the counseling process, intrinsic feelings are more easily aroused and motivation is more likely to result.

Applications/Conclusions

The dietitian has a huge role with significant potential to impact the quality of their clients' lives. A mediocre approach to helping clients is intolerable. With the variety of tools available to aid dietitians, there is no excuse not to work harder to connect with patients on more personal levels so that change and success can be facilitated. Since much of the advice of a dietitian should be followed for a lifetime, methods for long-term adherence must be utilized. There must be a goal to accept dietitian approaches as permanent behavioral changes rather than temporary "diets" (21). The job of a good dietitian is to study her resources and be prepared to connect with her clients in a variety of ways so he or she can learn their background and abilities as well as motivation level to make changes. Then, he or she can cater lessons and goal-setting to appropriate levels. Finally, the dietitian must incorporate counseling strategies into lessons. It is not enough to simply provide information. If the client does not change, both the client and the dietitian fail. The dietitian's goal for every client should be long-term success, which is achieved by a melding of the dietitian's and client's abilities to stimulate and maintain motivation.

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