Background

Childhood obesity (CO) is a growing global pandemic, with the number of obese children worldwide set to increase by 50% by 2025. Among Australian children (5-17 years), prevalence of overweight and obesity has risen from 21% in 1995 to 27% in 2015, with those living in outer regional/remote areas up to 1.5 times more likely to be above a healthy weight than those in urban areas.

General Practitioners (GPs) play a vital role in the treatment of CO, but their provision of guideline recommended management is impeded by:

- Low knowledge, awareness and/or trust of guideline recommendations;
- Barriers facing the GP on various levels of the ecological model of health:
  - Practitioners
  - Healthcare system and policy
  - Organisational
  - Community
  - Family
  - Patient/Child

Aims – To evaluate Australian GPs’ treatment of CO, focussing on knowledge, confidence, and attitudes in the area.

Hypothesis – Australian GPs will have varied knowledge of, and attitudes towards CO, with low confidence to implement management strategies and initiate discussions with children and parents.

Methodology

Study Design

- Four-month prospective cross-sectional survey study, commenced June 2019.
- Online survey for Australian GPs evaluating knowledge of, confidence to treat, and attitudes towards CO.
- Ethics by UNSW Human Research Ethics Committee. Approval number HC180860.
- Informed consent via online information and consent form.

Survey Design

Survey based on previously published survey studies and in consultation with GPs. It comprised 24 questions to evaluate demographics, knowledge of, and attitudes on CO.

Methodology continued.

Recruitment

The survey was validated via a pilot study (n=14), then distributed to over 8000 currently practicing GPs in Australia via a Qualtrics online survey.

Data Analysis

Data were analysed using Qualtrics for descriptive, correlation statistics, and Chi square tests, and SPSS for logistic regression analysis. Significance was set at P < 0.05 with 95% confidence intervals.

Results

Participant profile

- Valid survey responses were returned by 239 GPs.
- Rural and regionally practicing GPs made up 53% of the responses (n = 127).
- Female respondents contributed 80% of responses.
- Qualified GP fellows made up 82%, and 18% were GP registrars.

Knowledge

All Australian GPs displayed varied CO related knowledge;

- Respondents displayed moderate to high knowledge of NHMRC CO guideline recommendations,

![Figure 1. GPs’ knowledge of NHMRC CO management guidelines.](image)

- 80% of GPs could not accurately define CO.

![Figure 2. GPs’ definition of CO; accuracy assessed based on the CDC and WHO’s CO definitions.](image)

Confidence

- All GPs displayed high overall confidence in clinical scenarios related to CO.
- Significant barriers to raising CO in consultation were time pressure and potential for negative patient reaction, with rural GPs appearing more likely to cite these as barriers compared with urban GPs (P<0.032).

![Figure 3. GPs’ confidence in CO consultation scenarios.](image)

Implications for general practice

- Explicit assessment of GPs’ knowledge demonstrates GPs should collectively improve CO related knowledge.
- Most GPs feel confident in CO related consultations, however, multidisciplinary support for GPs must improve, particularly in rural areas given the high rates of CO in regional and rural Australia.

Future directions

This data must be collated with existing literature and presented to governing bodies to drive change on an organisational level as current strategies are under-developed and research is fast becoming outdated.

References