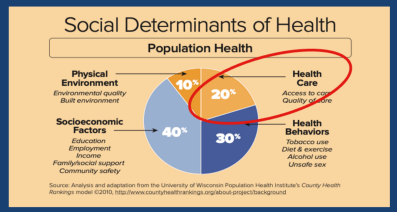
EXPLORING INTERSECTORAL RESOURCES DEDICATED TO PEOPLE LIVING WITH OBESITY IN PRIMARY CARE: PRELIMINARY RESULTS OF A SCAN ENVIRONNEMENTAL

Mégane Pierre 1, Anne Schweitzer 1, Sophie Marielle Yapi 1, Laurence Berthelet 1, Alexandre Tremblay 1, Nadia Sourial 1,2, Antoine Boivin 1,2, Maxime Sasseville 3, Jean-Baptiste Gartner 3, André Coté 3, Frédérique Bergeron 3, Lily Lessard 4, Brigitte Vachon 2, Géraldine Layani 1,2

1 Centre de recherche du Centre hospitalier de Montréal, 2 Université de Montréal, 3 Université Laval (Québec), 4 Université du Québec à Rimouski

INTRODUCTION

- Living with obesity is a complex, multifactorial health issue.
- The healthcare system contributes only 2o% of the factors affecting the health of people living with obesity.
- Interventions dedicated to people living with obesity need to be rethought in terms of an integrated, person-centered and intersectoral approach.

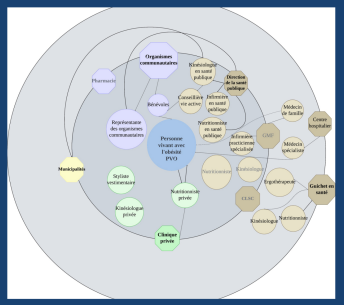


METHODOLOGY

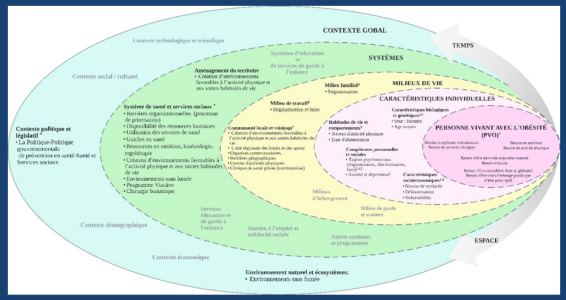
- Environmental scan between September 2023 and January 2024
- Literature review to identify current and potential cross-sectoral interventions dedicated to people living with obesity
- Semi-structured interviews with key stakeholders to document their perspectives and implications.
- Analysis of results using Actor Network Theory (ANT) and Pineault's health system framework.
- Modelling of health resources was carried out according to the principles of systems modelling.

RESULTS

- Several resources from the health sector (public and private) and the municipal sector were identified from the perspective of health professionals from the public network and that of a partner Person living with obesity.
- Partial representation of civil society sectors involved in people living with obesity healthcare
- Private healthcare resources are not coordinated with the public system.



Mapping resources for people living with obesity



Modeling resources for people living with obesity using Pineault's framework

DISCUSSION

- There are organizational, cultural, geographic and economic barriers to accessing resources dedicated to PVO. The care and services offered may be at odds with the needs and expectations of PVO.
- Stigmatization and bias can lead to avoidance of services, which can be detrimental to the person's health and quality of care.
- Resource modelling is a methodological process that facilitates the identification and involvement of actors and sectors playing a role in an intersectoral intervention focused on PVO.
- The results of this project will inform the players involved in the co-construction of an intersectoral community of practice in obesity, based on citizen governance and a health democracy approach.

RÉFÉRENCES

Twells, L. K., Janssen, I., & Kuk, J. L. (2020). Canadian adult obesity clinical practice guidelines: epidemiology of adult obesity. Canadian Adult Obesity Clinical Practice Guidelines, 1-8. https://obesitycanada.ca/guidelines/epidemiology
Pineault, R. (2015). Comprendre le système de santé pour mieux le gérer. Les Presses de l'Université de Montréal.
Ramos Salas, X. R., Forhan, M., Caulfield, T., Sharma, A. M., & Raine, K. (2017). A critical analysis of obesity prevention policies and strategies. Canadian Journal of Public Health, 108. doi: 10.17269/CJPH.108.6044
Pearce, C., Rychetnik, L., Wutzke, S., & Wilson, A. (2019). Obesity prevention and the role of hospital and community-based health services: a scoping review. BMC Health Services Research, 19(1), 116. https://doi.org/10.1186/s12913-019-4262-3
Jalbert, Y., et Mongeau, L. (2006). Prévenir l'obésité: un aperçu des programmes, plans d'action, stratégies et politiques sur l'alimentation et la nutrition. Institut national santé publique du Québec, https://www.inspq.qc.ca/pdf/publications/542-PrevenirObesite_ApercuProgramme.pdf
Lee Baggley, D., Fils-Aime, N., Audet, I., & Barakat, M. (2022). Improving implementation of best practices in obesity management. Physician experiences in obesity care. Clinical Obesity, 12(2), e12524. doi: 10.1111/cob.12524.
Tsai, A. G., Histon, T., Donahoo, W. T., Hashmi, S., Murali, S., Latare, P., ... & Solomon, L. (2016). Investing in obesity treatment: Kaiser Permanente's approach to chronic disease management. Current obesity reports, 5, 307-311. doi : 10.1007/s13679-016-0223-z
Ramos Salas, X. R., Forhan, M., Caulfield, T., Sharma, A. M., & Raine, K. (2017). A critical analysis of obesity prevention policies and strategies. Canadian Journal of Public Health, 108.doi: 10.17269/CJPH.108.6044
Epstein, R. M., Fiscella, K., Lesser, C. S., & Stange, K. C. (2010). Why the nation needs a policy push on patient-centered health care. Health affairs, 29(8), 1489-1495. doi: 10.1377/hlthaff.2009.0888.
World Health Organization. (2015). WHO global strategy on people-centred and integrated health services: interim report (No. WHO/HIS/SDS/2015.6). World Health Organization. https://iris.who.int/bitstream/handle/10665/155002/WHO_HIS_SDS_2015.6_eng.pdf
Bilodeau, A., & Potvin, L. (2016). Unpacking complexity in public health interventions with the Actor-Network Theory. Health Promotion International, 33(1), 173-181. doi: 0.1093/heapro/daw062
Gendron, S., & Richard, L. (2015). La modélisation systémique en analyse qualitative: un potentiel de pensée innovante. Recherches qualitatives, 17, 76-97. http://www.recherche-qualitative.qc.ca/documents/files/revue/hors_serie/hs8-17/rq-hs-17-numero-complet.pdf#page=80