MOVE

to improve veterans' health

ore than 5 million American veterans receive health care from the U.S. Department of Veterans Affairs (VA). Thanks to collaborations between the VA and UNC Gillings School of Global Public Health researchers, as many as 300,000 of them may be losing weight and better managing pain.

Deborah Tate, PhD, associate professor of health behavior and health education and of nutrition, has worked as a national consultant to the VA since 2008. Through MOVE!®, a weight management program developed by the VA's National Center for Health Promotion and Disease Prevention, she focuses on two projects designed to improve patient care.

Kenneth R. Jones, PhD, MOVE's national program director, applauds Tate for helping create the tools for MOVE! TLC (Telephone Lifestyle Coaching). "With that particular project," Jones says, "we had the largest percentage of weight loss yet seen with any version of MOVE! Forty-nine percent of participants who completed the program achieved a 5 percent weight loss, compared to

Dr. Morris Weinberger (left) and Dr. Deborah Tate visit the Veterans Affairs Medical Center in Durham, N.C.

about 26 percent who achieved similar weight loss with conventional MOVE! programs."

Tate also is helping develop a national eMOVE! program based on her research in Internet weight management support (see Carolina Public Health, fall 2010). "It's exciting to work with the VA as they bring proven research strategies into the implementation of programs that serve our veterans," she says.

Morris Weinberger, PhD, Vergil N. Slee Distinguished Professor of Healthcare Quality Management, also helps the VA improve its interventions. Weinberger co-authored two papers published in 2010 in the Annals of Internal Medicine on studies conducted at the VA. One examined SeMOA (self-efficacy management in osteoarthritis), a telephonebased self-management support program for patients with hip or knee osteoarthritis, and found that it produced moderate improvements in pain.

The other paper reported on the effectiveness of group visits for veterans being treated for diabetes, showing that patients in group medical clinics had lower blood pressure and lower LDL cholesterol than those in standard VA care. The researchers are consulting with VA clinical leaders, several of whom want to start group medical clinics, to advise about implementing the clinics and analyzing their success. They also want to determine how best to test the group medical clinic model in non-VA settings.

As VA researchers, Weinberger says, "we have to think in advance, Is this feasible? If this works, will it make a difference? It's not hypothetical research; you have to think about what happens afterwards."

- Michele Lynn