

CERTIFICATION BOARD FOR OBESITY EDUCATORS
CERTIFIED OBESITY COUNSELOR PROGRAM

VISION:

Reduce the prevalence of obesity across all social and economic settings in America.

MISSION:

The Certification Board for Obesity Educators (CBOE) is dedicated to help healthcare providers use the highest quality of information (techniques, interventions, behavioral directives) when attempting to help obese people lose weight and keep it off. CBOE will do this through the development and maintenance of a standard method of assessing knowledge and basic competence known as the Certified Obesity Educator (COE) credential.

OBJECTIVES OF CERTIFICATION:

Certification is a voluntary process used to assess and validate qualified health professionals' knowledge in obesity counseling and education. It is an evaluative process that demonstrates that rigorous eligibility requirements have been met. The COE credential demonstrates that the certified healthcare professional possesses distinct and specialized knowledge, thereby promoting quality care for people who are obese.

The specific objectives of the COE program are to:

1. Provide formal recognition of a mastery of knowledge about obesity counseling and education.
2. Provide a mechanism to demonstrate professional accomplishment and encourage professional growth in the practice of obesity counseling and education.
3. Provide to consumers and employers validation of specialized understanding of obesity counseling and education.
4. Promote continuing commitment to best practices, current standards and knowledge of obesity counseling and education.

THE COE CERTIFICATION PROCESS:

Through objective testing, the COE candidate must show mastery of current, state-of-the-art and science knowledge about obesity, including its causes and treatments.

Information tested, will cover obesity as a chronic disease, identification and selection of people likely to be successful with treatment, various psychological principles and

approaches used in interventions, appropriate dietary and physical activity recommendations, and specific techniques that promote successful long-term weight management.

Through skills or application testing, the COE candidate must demonstrate appropriate selection and implementation of behavioral skills and techniques that best apply to each potential client's personal and social situation.

Maintenance of certification or re-certification will be required periodically.

THE THREE PRIMARY ASSUMPTIONS IN COE:

1. Obesity is a chronic disease that can be managed, but not cured.
2. Successful long-term management of obesity is possible; the maintenance phase of weight control, however, differs in some notable ways from the active weight loss phase.
3. Providing state of the science education and counseling can help many people lose weight far more efficiently and effectively than they could without such knowledge and counseling.

THE THREE FOUNDATIONAL COMPONENTS OF COE COUNSELING:

1. Dietary guidance as a way to reduce caloric intake.
 - a. Key elements: reduce fat intake using goals that produce the best results. For example, it appears to be appropriate to set a goal for a low consumption of dietary fat (goals may range from 10-25% of total calories). Additional key elements include: consume foods that are low in caloric-density ; eat calories rather than drink them and particularly avoid high calorie drinks; limit sugar intake, particularly in snacks; consume protein throughout the day, especially from plants; consume high levels of fiber (goal: 30 grams/day); maximize enjoyment of foods that meet these criteria (through variety; healthful treats and desserts; foods that mimic the look, feel, and taste of favorite foods that are high in fat).
 - b. Knowledge and skill to tailor dietary recommendations to client circumstances (including personal and cultural sensitivity; work and extant lifestyle patterns) will be tested. Partnership with other healthcare providers (e.g., dieticians, nurses, psychologists) will be encouraged.
2. Physical activity guidance as a way to increase expenditure of energy, avoid metabolic adaptation to reduced calorie intake, and maximize maintenance of weight loss.

- a. Key elements: Gradually increase physical activity to a goal of ≥ 60 min/day, recognizing some people may need more and some less. However, high levels of physical activity are one of the major predictors of success in weight loss maintenance. Schedule physical activity most days for 60 minutes or longer. Candidate will demonstrate knowledge of the various components of physical activity (aerobic, muscle tone, and stretching) and understand the importance of promoting daily use of a pedometer to measure and focus on movement (e.g., with goals set individually, but for most will be $>10,000$ steps per day).
- b. Knowledge and skill to assess a client's physical capability and make appropriate recommendations for physical activity will be tested. Partnership with a physician or physical therapist will be encouraged.
3. Behavioral counseling as a way to increase the client's commitment to lifestyle change and reduce the psychological barriers to effective execution of the key elements of the processes required to maximize long-term implementation of changes.
 - a. Demonstration of understanding of the psychological principles and theoretical models that underlie the development of interventions for successful weight control. These include models of addiction, stages of change, self-regulation, and affect management.
 - b. Mastery of the use of primary techniques and conceptualizations that have demonstrated their efficacy in helping people lose weight and/or are considered very useful by master therapists in this arena (e.g., self-monitoring; journaling; goal setting; planning; problem solving; rational emotive therapy; stress management).
 - c. Demonstration of understanding of conceptualizations and techniques that have shown substantial promise to help promote long-term change and maintenance of weight loss (e.g., critical role of high levels of physical activity every day; healthy obsession; management of environment, including family support and work and restaurant settings).

IMPLEMENTATION OF COE KNOWLEDGE AND SKILLS:

The COE will demonstrate an understanding of how to adapt the core knowledge and skills in a wide variety of settings including, but not limited to, immersion programs (with nearly ideal weight controlling environments and support) to abbreviated contacts in primary care medical offices; understanding of the potential advantages and disadvantages of various treatment modalities will be examined (including residential, immersion, outpatient counseling, and self-help materials and groups).

MEASUREMENT OF OUTCOMES:

COE's will demonstrate a basic understanding of statistics and participate in evaluation studies if possible.