

# Reflections on a Therapeutic Healthy Lifestyles Intervention for Three U.S. Service Members and One Civilian

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**Abstract:** In this narrative, I describe the experiences of three male military service members: 44-year-old African American, 36-year-old Hispanic American, 30-year-old European American and one 28-year-old civilian African American male and my interactions with them. All four men joined a 12-week health, wellness, and financial literacy program operating under the umbrella of a social work clinical research setting in the Dallas-Fort Worth, Texas metropolis. They all had the same goal of losing weight, but for different reasons. Although two accomplished their weight loss goals, and one of those two lowered his blood and glucose levels, the other two learned healthy lifestyle changes that I hope will be forever implanted in their hearts as they continue their journeys to ideal cardiovascular health.

**Keywords:** wellness program; process recording; healthy lifestyle intervention; obesity; motivation

This narrative describes my experience as a novice civilian military social worker who, due to a class requirement, implemented a healthy lifestyle intervention created for mother and child dyads, but was later tailored for a select group of service members and one civilian. This program operates under a social work clinical research setting in the Dallas-Fort Worth, Texas metropolis. Obesity is a serious public health issue in the state of Texas, as rates are expected to double in less than 20 years in more than half of residents. It is well documented in the literature that overweight and obese individuals encounter employment, education, and healthcare discrimination. Regarding job applicants in the civilian world who have the same qualifications, overweight and obese individuals are rated more negatively and are less likely to be hired. However if an applicant is seeking military employment, his/her chances of employment move from “less likely to be hired” to possibly “not being hired at all.”

According to Mission: Readiness (2012) childhood obesity is a national security issue, as one in four young adults are ineligible for military recruitment because they are either too overweight, poorly educated or have a serious criminal record to join the military. In addition, the military has spent well over \$1 billion a year on treating weight-related diseases (Department of Defense, 2012). The rising prevalence of obesity in civilians presents a challenge for military recruitment (Yamane, 2007).

As of 2007-08, those who were between the ages of 17-42, were over the body fat and weight enlistment standards for the Army. This means that, due to weight and body composition, 5.7 million men and 16.5 million women were ineligible for military enlistment (Cawley & Maclean, 2012).

All four men in this healthy lifestyles intervention had an overall goal to improve their cardiovascular health. One in particular needed to lose weight as he was preparing for an upcoming military fitness test. Due to military budget cuts, he was well aware that if he did not meet the required fitness standards, he could possibly be dismissed. Because service members have to work under serious and challenging conditions, being healthy and fit is essential to national security. To hear a civilian discuss a dilemma such as this, in terms of job security, is highly unlikely. In the civilian workforce, it is more common to hear that one has faced weight-based discrimination in career advancement.

As an African American female social work Ph.D. student, my research area is obesity prevention and cardiovascular health improvement. My family history is painted with members who have various types of cardiovascular disease and some who even lost their lives from various health disparities. After completing a research project to assess the needs of returning student veterans at The University of Alabama and finishing a graduate internship at

Walter Reed National Military Medical Center, I thought that I knew a lot about United States service members. However, I quickly learned that the old adage is quite true, “When you meet one veteran, you have met one veteran. All veterans are different.” After working with these service men and the civilian for 12 weeks, I fully grasped the overarching implications of that statement.

The overall purpose for this project was to help social workers identify the needed knowledge, attitudes, and skills necessary, while working with veterans and their families who may be at risk or affected by cardiovascular disease risk factors such as obesity, diabetes, hypertension, high cholesterol, etc. The health, wellness, and financial literacy program implemented here is just one of many that operate under this clinical research setting. Participation in this study consisted of the following: a single two-hour face-to-face session (pretest), follow-up half-hour telephone sessions, weekly health tips which lasted 12 weeks, and a post face-to-face health counseling wrap-up session (posttest). With the exception of pretest and posttest sessions, this program was not initially designed for 12 weekly health counseling face-to-face sessions, but rather weekly phone sessions. However, in this narrative I will explain the occurrence of one exception. To track the progress of all participants, they were asked to complete questionnaires and wellness journals. Also, participants engaged in health, wellness, and financial literacy counseling interviews by phone each week for 12 weeks.

Three service members and one civilian, all male, enrolled for this intervention: one African American/Veteran, one Hispanic American/Active Duty Reserve, one Caucasian/Active Duty Reserve, and one African American civilian. For this narrative, I will refer to the African American male veteran as Detroit, the Hispanic American as El Paso, the Caucasian male as Denver, and the civilian as Memphis.

Needless to say, I was ecstatic to work with these men and help them obtain their weight loss and overall health goals. However, as a 26-year-old black female working with four men individually, I did begin to wonder if I could truly help them. I also wondered if my ethnicity or gender would help or hinder my relationship with these four men.

We'll see at the end of 12 weeks!

### **Participant Profiles**

As previously stated, due to a class assignment for an outside elective, I had to work with an individual(s) and help them obtain their weight loss and overall health goals. I recruited participants by placing flyers all over campus, sending mass emails, and asking people by word of mouth. However I did not want just anyone to join. I specifically wanted an equal sample of veterans or active duty service members and civilians, but unfortunately that did not occur.

#### **Detroit**

Detroit is an African American male, 5 feet 9 inches tall, body mass index (BMI) = 35.4, and 44 years old. He is a grandfather, lives with his wife and all four of his children are grown. Detroit was a part-time worker at the host clinical setting, but under a different program. Suffice it to say, I saw him at least once a week which was unavoidable. After hearing my frustration with not being able to recruit enough people for my class project, Detroit expressed that he needed to lose weight and lower his cholesterol and blood pressure. Unbeknownst to me, Detroit had served in the military. He said he wanted to join my study because he was seeking overall self-improvement and wanted to adopt healthier eating habits. “I just want to be healthy, ya know, because a lot of my family members had health problems.”

As a matter of fact, Detroit was diagnosed with hypertension and was told by his doctor that he needed to monitor his daily food intake. His father died from abdominal cancer, while his older brother died from prostate cancer. Furthermore, his mother was diagnosed with high blood pressure. Detroit's doctor recommended that he eat more fruits and vegetables. He was highly motivated and had superior support from his friends and family.

Because Detroit and I worked in the same setting (yet under different programs), instead of providing him with 12 weekly telephone health counseling sessions, we met face-to-face instead. I had a gut feeling from the very beginning that Detroit would probably fare better than any other participant at the end of the program, as he was the only one of the four that saw me on a weekly basis. No one else

would benefit from these face-to-face sessions.

### **El Paso**

El Paso is a Hispanic American male, 5 feet 9 inches tall, body mass index (BMI) = 35.0, and 36 years old. He was referred to me by another social worker who stated that she had a client that needs to retake his military physical activity test. El Paso did not want to risk the possibility of failing his activity exam, as he was receiving numerous Veteran Affairs (VA) benefits. Failing such a test could put him at risk for loss of benefits. The reserves would have allowed El Paso to retake his physical until he passed, but he wanted to pass on the first go around. After hearing about my program, El Paso felt that he should join because it could possibly serve as a support system. The first time I met with El Paso was at McDonald's (a favorite restaurant of his) and he shared with me that he wanted to lose 20 pounds, however, according to him, the hardest thing about managing his weight was his dietary intake. In the past he tried the Subway diet for breakfast, lunch, and dinner. He lost 10 pounds and gained it all back. El Paso also eats at a local mom and pop Mexican restaurant each day. "It's hard to turn down those burritos and tacos. That place reminds me of home." After hearing this, I began to think of how I could help him select healthier meals at this local restaurant.

Now, some readers may wonder why I met with El Paso at McDonald's instead of the clinical site. One of the objectives at the clinical research center is to provide assertive community outreach, meaning we will go to our participants if needed; they do not have to come to us. Our center is a strong advocate for not placing additional barriers on our clients. Therefore certain programs allow for us to meet clients in a setting that is conducive for them.

### **Denver**

Denver is a European male, 6 feet 5 inches tall, body mass index (BMI) = 33.9, and 30 years old. He joined the project by way of a flyer that he noticed on campus. When we met face-to-face, he revealed that he thought I was offering academic/life counseling services. I told him that counseling was not the main focus in the program, but that would not preclude me from implementing such services at his request. He mused over this for a few seconds and said, "OK." Denver's father had

a heart attack two years ago and his mother was diagnosed with coronary artery disease. He lives with his wife and six-year-old daughter. In 2005, he joined Weight Watchers and lost 40 pounds in four months, but he gained all of his weight back. He began Weight Watchers again in December 2012 and lost six pounds. Weight Watchers taught him that his current weight was very unhealthy and one thing he disliked the most about Weight Watchers was counting points. "Man, counting points is hard; they expect me to write down every little thing that I eat. I keep forgetting, and I just usually give up." He usually has problems "falling off the wagon." He feels that when he waivers from his diet, it's a lost cause and he might as well eat whatever he wants. Most importantly, he does not want to be a victim of heart issues like his parents. His goal is to reach a healthy weight.

Denver says the hardest part about managing his diet is where he works, Starbucks. At Starbucks, Denver can get free items whenever the store is open. Even if he is not working, he can drive-by, or stop in, and get free food. Denver stated, "Who wouldn't want to eat free food?" Also, Denver began the program one week prior to the Super Bowl. He told me that he already knew that on Super Bowl Sunday he would eat tons of foods that were not healthy. Denver and I discussed a few healthy choices that he could substitute for unhealthy foods on Super Bowl Sunday. He said that he would give this a try, but I never heard how this went for him. Later you will know the reason why.

### **Memphis**

Memphis is an African American male, 6 feet tall, 35.4 body mass index (BMI), and 28 years old. He heard about the program from a friend who lived in Texas. Memphis' friend provided me with his contact information as he granted permission for me to contact him. I spoke with Memphis and explained the purpose of the program/project. Although Memphis lived in the Northeastern part of the United States, his location did not exclude him from being a participant. Although I met with all other participants for the pretest and posttest face-to-face, Memphis and I met via Skype. After hearing all details of the program, Memphis expressed strong interest in joining because he stated that he needed a strong support system.

“Tracey, mane, I just don't got no one around me that can help me stay motivated. They think I'm crazy cuz I try to watch what I eat. My homeboy said that he watch what he eat too... Yeah, he watch it go straight in his mouth!” Memphis was interested in losing weight because he wanted to try out for a professional football team. He is a welder, lives with his younger brother, and has a bachelor's degree. “Mane, I ain't never wanted to give up on my dream of playing ball, but I'm starting to realize that it might not come true. If I don't make it, I guess I'll just go to school to cut hair.” In fact, I could easily sense his frustration and despair as he described this intervention program as his last resort.

He was very interested in losing weight because he feels like this is his last chance at professional football. Since he was a small boy, born and raised in the South, he has always dreamed of playing football. He played in college but was hurt on two occasions. He feels that it is his duty to help his family out of poverty. Memphis was well aware that the odds were against him. He knows that his current age, 28, is typically when most professional athletes begin to see a decline in performance. Memphis knew that he would be competing against individuals who were in their early 20s, but playing for a professional team, and trying out for one was always a dream of his. At one point Memphis stated, “Yeh, but God will make a way. If it's for me, it's for me.” Memphis often said that if he did not make the team, at least he knows that he gave it his best. Memphis also shared with me that his mom is obese, but his father is not. Also, his maternal grandmother died from cancer, but he could not recall the type. Memphis does not have much family support in his attempts to lose weight, so he wants to enroll as a way to have an accountability partner.

### **Let the 12-Week Counseling Sessions Begin**

#### **Weeks 1 and 2**

As previously stated, the intervention required me to implement 12 weekly telephone sessions regarding nutritious meals, physical activity, and financial literacy. Detroit was the only participant that did not receive weekly health counseling sessions by phone, instead we met in person at the research clinic. During this time, Detroit lost four pounds.

In the second week, he told me that he wanted to bring a slice of cake to work for his lunch dessert, but was afraid that I would catch him. I told Detroit that it was ok if he had cake once in a while, but he should learn to consume everything in moderation. Detroit had numerous questions outside of the weekly content provided in the curriculum. I had to do a lot of extra research for him. It was frustrating at times, but I'm glad that he was so eager to improve his health. He also shared with me how he increased his running speed. Detroit stated that his wife said to him “Oh, so you can't get healthy when I want you to, but when someone else helps you, you do what they say.” Detroit said he replied, “Yep!” Overall, Detroit said that his wife told him that no matter whom or what inspired him to get serious about his health, she was happy that he was making positive lifestyle changes.

Within these two weeks, El Paso had lost two pounds. I knew El Paso would not stop eating from his favorite Mexican restaurant, so I made attempts to help him make healthier choices from the menu. As previously eluded, El Paso ate at a mom and pop restaurant. Therefore they didn't have a website. So, one Saturday evening I drove to the restaurant to locate a menu. To my surprise while standing in the back of the line, El Paso was at the very front placing his order. I was so embarrassed! I did not want him to think that I was stalking him. I assume that he thought nothing of it because after seeing me, he invited me to sit down and eat with him, but already feeling uncomfortable, I made up an excuse, grabbed the to-go menu and left. After getting home and going through the menu, I realized that based off the menu, El Paso had no healthy options from which to choose. I called the restaurant and asked what vegetables they served. I was told only lettuce and guacamole. “That's it!” I replied. “Nothing else?” That's all, I was told. I asked “Well can you bake anything instead of frying it?” The receptionist replied, “We fry everything here; we don't bake. I'm sorry ma'am, but I have to go now.” After hearing this I felt so defeated. How can I help El Paso eat nutritiously from his favorite restaurant when they don't provide healthy options? I mused over this for a few days. Needless to say, I had my work cut out for me.

During this time, Memphis lost five pounds. The key to his success was that he stopped drinking a



large majority of his calories. Memphis said that after reading the article I emailed him regarding sugary, flavored beverages, he saw a huge need to drink only water. However it was not easy for him to do this as his brother loves to drink sodas and juice, and these items still remained in his home. After realizing that we had numerous similar childhood upbringings, Memphis would oftentimes ask me to pray for him. This is something that none of the other men ever requested from me. I began to wonder, “Will his faith impact his outcomes?” Only time will tell...

By the end of week two I was very proud of these men. Three of them adhered to their appointment times and were very engaged during the health counseling sessions and even requested additional material. However, I could not say the same about Denver. I made several attempts (called, texted, and emailed) to contact Denver, but he did not return my messages. When we met for the first time, he appeared to be highly motivated to lose weight, so it was difficult for me to understand his lack of treatment adherence.

### **Weeks 3 and 4**

#### **Detroit**

Detroit appeared to be meeting all of his goals. According to him, he was exercising longer and with greater intensity. He downloaded a free weight loss application online and provided me with his login and password. Detroit said that it would help him if he could email me his daily food logs each night. No one else did this. So, just like clockwork, at the end of every day around 11 p.m., Detroit would email me his daily food log via the online weight loss program. By doing this, I was able see what he ate each day. Because Detroit was so methodical in everything he did, he would also preplan every meal the night before. This gave me the opportunity to see what Detroit ate that day, and what he planned to eat the following day. This was very instrumental as it helped me to structure the advice I gave to him. Since Detroit requested extra help, I could predict that he would probably lose more weight than the others. There were times when Detroit had slight problems with particular “situational” triggers. Meaning, he could have satisfied his hunger, but when he passed the snack machine, he would purchase an item or two. I

suggested that he no longer walk by the one snack machine that is located in the entrance of the building where he works. Detroit enjoyed eating food late at night in the bed because he had issues with insomnia. He said this stems back to a few traumatic experiences from his deployments. Detroit also loves Snickers, and I suggested that he replace Snickers with high fiber chocolate bars (110 calories each).

#### **El Paso**

By this time, I had gathered two additional Mexican restaurants of El Paso's choice and in turn, I had no luck with them as well. Therefore I found a few healthy Mexican recipe dishes online and shared them with El Paso. He said that he would give it try, but I wasn't too confident that he would. During these weeks, he shared that he went grocery shopping and attempted to select healthy foods. He was now preparing a brown bag for lunch and only eating at a restaurant every three days. This was a big adjustment, as El Paso used to eat out daily, maybe twice a day, before beginning the program. El Paso stated, “I still snack at night, but I try to remember what you said and make healthier choices.” I praised El Paso for doing such a great job. I inquired about his level of physical activity, and he stated that he had no time to exercise.

El Paso worked six days a week at a job that required him to sit for nine hours or longer. Two nights a week after getting off from work, his college night class would begin within two hours and on Wednesdays he went to church. On most weekends, if he didn't attend drill, he was helping his parents or some family member with yard work. El Paso felt that the exercise he got on Saturdays and Sundays were enough. However I explained to him how important it is that he tries his best to reduce sedentary time as much as possible throughout the week. I gave him the following tips: use the stairs instead of the elevator or escalator, when going places locate a parking spot far from the door, and get up from your desk at least every 30 minutes to one hour to stand up or walk. I also suggested that he try and exercise 30 minutes on a few days before work.

#### **Denver**

This week was no different than the weeks before. Denver would not return my calls, texts, or emails.

I remembered during his intake that he mentioned going to the gym every morning on certain days of the week. For the next two weeks, I went to the gym when he was supposed to be present, but he never showed up. By this time I began to wonder... Is it me? Did I offend him? Why isn't he returning my calls, texts, or emails? Why is Denver not at the gym? (He had told me this was when he worked out.) Due to the phone that Denver had, I was able to see on my end the exact time he received and read my text messages. This really hurt my feelings. There were times when Denver would receive and read my messages immediately, but he never responded. I felt terrible.

### **Memphis**

In weeks three and four, Memphis slowly began to lose motivation to obtain his goal because his car broke down and he was dissatisfied with his current job. I tried to help Memphis locate jobs in his area, but he would never follow through. I even helped him with his resume, cover letter, and drafted emails to potential employers, yet still, he would never follow through. He would talk to me for hours about his football career dreams, but his actions did not always line up with what he should have been doing. Memphis would often blame his limitations on his lack of transportation to a gym. I suggested that instead of driving to the gym that he should try walking. Memphis replied, "Mane, Tracey, do you know how far I live from the gym? Plus it's cold as a mutha outside. I'm gone freeze off my black tail." It appeared that Memphis was slowly sinking into a deep bout of depression. Therefore, I began implementing problem solving therapy with him.

At first Memphis thought I was crazy to suggest that he may need some type of therapy. It is well documented in the research literature that most African Americans do not seek mental health treatment due to the attached stigma. However, since he did not have to go to a physical location and "therapy" took place by phone, he began to accept my help in this area. Also, Memphis and I discussed the possibility of asking someone to take him to the gym after work, but he stated this was not an option. Within a few days, Memphis created his own gym-like obstacle course in his home, yard and basement. He realized that everything he needed to work out was located at his fingertips, in his home. He said that this realization came after utilizing

problem solving therapy.

### **Weeks 5 and 6**

#### **Detroit**

This week Detroit reported "I went to the doctor today, and my cholesterol was down. My doctor says if it stays this way when I come back in 3 months, then he will take me off of my medications!" This week, Detroit's plan was to increase his weight lifting. However this did not happen because he injured his shoulder. I suggested that he go to a doctor, but he didn't think it was that serious. I began to wonder if he was overdoing it. Maybe Detroit was trying to lose too much weight in a short period of time. Also, during week 5, Detroit did not pass a major state licensure exam. Four of five days this week he went over his daily caloric budget. Detroit did not understand why he was not losing weight as fast as he had been in the beginning. He did admit to indulging in a lot of junk food to calm his nerves due to failing his exam. He discussed with me how defeated he felt after failing his exam. Plus, everyone at his current job knew that he was scheduled to take the exam on a particular day, so he had to come to work with numerous people asking if he passed or hearing congratulations when indeed he did not pass. I could understand how he felt as I did not pass a similar exam the first time a few years back. I was hoping this would not set him back in terms of his weight loss goals. I'll never forget something Detroit shared with me... "I've been through a lot. It sucks that I didn't pass, but I'll get over it eventually and retake it. When I was deployed, I should have died at least three times, but I didn't. If I can survive that, I can surely pass this test." After hearing this, I was sure that Detroit would get back on his feet. He just needed some time.

#### **El Paso**

For the past two weeks, I made several attempts to contact El Paso. My first assumption was that school, work, family, and church must be getting pretty hectic. The one time that El Paso returned my call was during a moment when I was not available. I called him back several times, but he didn't answer. I began to wonder why I was not being successful at reaching him. Did I say anything the previous weeks to offend him? Could possibly life in general just be too overwhelming at

the moment? Even though El Paso did not reach back out to me, I still made several attempts to touch base with him. I sent him healthy Mexican dish recipes, but still to no avail.

### **Denver**

This week Denver emailed me stating that he was deeply sorry for the lack of communication. Within the past few weeks he had lost a dear friend, was struggling with his four classes, and he was having smoking issues with his Post Traumatic Stress Disorder (PTSD). Furthermore, he just found out that his wife was pregnant. He sincerely apologized and stated he would start logging everything in his free online web application starting that day. Although Denver stated that he would begin logging everything daily, he did not follow suit. I appreciate Denver providing me with an update; however, he still did not complete what he said he would do in the email that was sent. I realized that he currently had numerous life altering circumstances, and health, physical activity, and weight loss no longer appeared to be a top priority. In my reply email, I offered to counsel Denver if he needed someone to talk to, but he never took me up on my offer. I located resources to assist him in dealing with issues of PTSD and smoking and shared these with him, but he never replied to my email. I also shared with him the numerous resources and counselors that were available in the area that worked with veterans specifically. I wanted to give him an opportunity to work with or see another counselor besides me just in case he wasn't comfortable with me, or sharing this very fact, but he never followed through.

### **Memphis**

I recognized that Memphis was not keeping up with his daily logs as he once had. A few days later, he told me that his grandfather passed away. Memphis has been under a lot of stress lately and this is why he had not logged food or exercise this week. However he did report that he rode a bike for 20 minutes, walked a mile, and completed a 15-minute run one evening after work. The funeral was scheduled to take place down south. Already struggling to make ends meet, Memphis had to borrow money from a few friends just to get home for the funeral. Also, because he could not afford to fly, he had to drive, which caused him to miss a day of work, which set him back even more financially. Before he traveled home down south, he told me

that he knew it would not be easy to remain physically active and make healthy food choices. So for these weeks my plan was to let Memphis grieve the loss of his grandfather. I told him not to worry about his logs. However I did explain to him that exercise may indeed help his overall mental health. My plan was to not "hound" him about eating healthy and logging his food. I gave him about two weeks to recuperate.

### **Weeks 7-8**

#### **Detroit**

Over these few weeks, it appeared that Detroit was doing well. He removed the candy jar (situational trigger) from his home that sat in the living room and replaced it with a fruit bowl. Also, Detroit told me that at one point he saw me on campus and he thought I saw him too. He was on his way to the snack machine. He said this was a quick reminder to him that he should make a U-turn and go back to his desk. At this time it seemed that he had overcome not passing the licensure exam. He was back to his regular self. When Detroit didn't pass his exam, he began to do a lot of reflecting on his time spent overseas. He told me that he could not get over his experiences from serving in Iraq. He would often ruminate over the several times he should have died and he realized how much devastation this would have brought his wife and children. Detroit realized that he endured three "near-death" experiences, so with this perspective, not passing a test could not compare. He continued to lose weight and at this time was five pounds away from his weight loss target. When comparing his logs from the past week to the current week, it was apparent that he took my advice and made high fat reductions.

#### **El Paso**

For these two weeks, I called, emailed, and texted El Paso, but he never responded. By this time I was really hoping that he was ok because it was not like him to ignore my calls and emails and never return them.

#### **Denver**

For one week during this two-week time period, Denver emailed me his food logs, but he would not answer the phone when I called. He later informed me via text that he had not been feeling well and stopped going to the gym. Based on his class

schedule, I could see that he was very busy and was enrolled in many classes that had a lab. I was concerned that he was not eating enough due to the overwhelming stressors of school and daily life. I voiced these concerns, but told Denver that I was proud of the healthy food choices he was currently making. I also offered to counsel him and suggested other counseling places, but he did not acknowledge my suggestions as we were communicating via text.

### **Memphis**

Due to Memphis' grandfather's passing, his schedule was greatly affected. He did not track his food for almost two and a half weeks. However, he did tell me that he lost a total of 11 pounds. To help him get back on schedule, he started taking weight loss supplements and muscle enhancements. He took only one pill per day in the morning before breakfast, along with one orange, and drank water. In addition to these pills, he also took an OMEGA 3 pill before going to bed and usually ate a small sandwich at night for dinner. I was very concerned about the weight loss supplement that he was taking, so I decided to do some extra research on the side. I found that these pills had numerous life threatening side effects and I shared these articles with Memphis. He was not fazed by the facts at all. He stated, "Mane, my uncle sell this stuff. He wouldn't give me nothing bad." In fact, his uncle was a distributor of the product and Memphis felt that he could trust anything provided by his uncle. He also stated that he would be fine, since it was just a 30-day weight loss program. Needless to say, I did not want Memphis taking these pills, and I still fear the long-term health consequences that could result years from now.

### **Weeks 9-10**

#### **Detroit**

During these weeks, Detroit was very happy and he continued to make behavior modifications and it appears that he seriously applied the weekly health counseling lessons to his daily life. He had lost a total of 18.4 pounds, and he was excited about reaching his overall goal of 20 pounds within the next two weeks. I was so proud of Detroit. He received numerous compliments and this was a tremendous boost to his self-esteem. Detroit also asked if he could continue to send me his food logs after the program ended. I thought to myself, "If he

does this I'll have to continue doing research on his behalf... I wasn't too fond of still having to work on this project although I was very happy that he had truly been successful." I told him that he could send them to me if it helped him, but I could not provide any tips or do extra research as the program will have ended. Detroit stated that he understood.

#### **El Paso**

During these weeks, I finally spoke with El Paso. He shared that he had a lot going on in his life and he would not be able to participate in the program any longer. He apologized for "wasting" my time. I explained to him that he did not waste my time and I hope that he learned a little for the time that he was enrolled. Consequently, he felt that he had taken on a class load that semester which was not ideal. He explained that his grades were beginning to drop and he did not need to be involved in anything "extra." I offered to connect him with a local tutor that helps veterans for free, but he stated he did not have time. I asked him what he was going to do about his military physical exam. He explained that since he could keep taking the test until he passed, he would rather go with this option. Also, El Paso got another job, so he now had to work on weekends, which took away more time from his studies.

#### **Denver**

Unfortunately, I did not hear from Denver during these weeks. I tried my usual methods of contact, but he never responded. In my heart, I felt as if Denver had dropped out of the program weeks ago, but did not make this declaration as I had with El Paso. I was left with so many unanswered questions.

#### **Memphis**

This week, Memphis appeared to be on track and he didn't mention any problems. Tryouts were quickly approaching. Memphis had experienced a lot in the past few weeks and his spirit was not the same as before. He was excited about tryouts, but he no longer carried victory in his heart. For the past couple of weeks, we had only texted and not spoken to each other.

He stated that he just did not feel like talking. He self-reported via cell texting that he lost an additional four pounds. During this time, he was



trying to maintain this weight because he had now reached his weight loss goal of 15 pounds.

### **Weeks 11-12**

#### **Detroit**

At this time, Detroit appeared to be very happy with the weight he lost. He was also proud that he lowered his cholesterol, and if he continued these lifestyle changes, he could cease taking his cholesterol medication. Detroit felt like he had done so well because he “knew” that I looked at every meal that he ate daily. According to him, “I won't have problems continuing the lifestyle changes once I'm out of this program.” Furthermore, he planned to send me 3-, 6-, 9-, and 12-month updates. Incidentally, Detroit successfully reached his weight loss goal of 20 pounds!

#### **El Paso**

I did not speak with El Paso during the final two weeks as he stated that he did not want to participate any more.

#### **Denver**

At this time, I still had not heard from Denver and he had not emailed, texted, or responded to any of my attempts to contact him. I assumed that final exams were having a huge impact on him and he probably was feeling more pressure than ever to finish the semester successfully, by passing all of his classes. Also, due to previous email conversations, I assumed that his additional life stressors had probably added to his lack of communication. However, knowing all of this did not stop me from feeling as if I failed Denver in some way. I reached out to him numerous times and I knew that he was purposefully ignoring me. I could see when he would read my text messages. Still today, I'm not sure what I could have done to help him. Or maybe he was not ready to change. Maybe he was still in the pre-contemplation and contemplation stages of change. I guess I'll never know for sure.

#### **Memphis**

After tryouts, Memphis felt a little defeated as he stated “This was a little more than I bargained for.” He self-reported that he felt like he was as prepared as he possibly could be for the tryouts. Although he did not make the team, he lost weight, has a new job, and feels good about himself. I was very proud

of Memphis.

### **Conclusions**

Although I began this project with the goal of helping four men learn more about healthier eating habits and lifestyle choices, I possibly ended up learning much more than they did. Albeit research is present which identifies “ideal” lifestyle choices and healthy weight management techniques, I have yet to find an all-encompassing guide that helps one to deal with daily life stressors while seeking to lose weight. Weight loss management is often viewed as a “beast” itself. Invariably, when one is presented with additional, often magnified challenges, the issues associated with weight loss are usually tossed to the wayside.

Under the new Affordable Care Act, it is required that most insurance plans help obese patients lose weight. Also, the VA has a 12-week program, called MOVE!, that is designed to help veterans lose weight. I would argue that losing weight, in addition to dealing with stressors of daily life, would be more arduous for veterans when compared to civilians. The veterans that I encounter are still dealing with trauma-related issues such as PTSD from military service. The Substance Abuse and Mental Health Services Administration (SAMHSA) stated that “trauma exposure has been linked to later substance abuse, mental illness, increased risk of suicide, obesity, heart disease, and early death” (SAMHSA, 2011, p. 8). Issues such as traumatic brain injuries, PTSD, musculoskeletal issues, and many more can impede progress towards goals that one may have set for themselves, such as weight loss.

Throughout the 12 weeks, I learned that life doesn't just “wait” to happen to us when it's convenient. Although one can have the best-laid plans, a wrench can be thrown in the midst which completely throws all well-meaning efforts off track. During these times of difficulty, it's inherently important to keep “first things first.” In essence, an individual can desperately long with all of his heart, mind, and soul to lose weight, but without the proper support and guidance, all efforts can become null and void. I often wonder if I provided enough support to these men, as they struggled with major life events. Should I have halted the food education efforts and focused more on “soul searching” to identify deeper

issues that were present which ultimately hindered some of their progress? Could I have experienced better results if I had simply provided more empathy to El Paso, as he expressed his frustration with the additional stressors that entered his life? Would things have been different if Memphis had not lost his grandfather? Could the stress associated with this major loss been more important than focusing on weight loss at the time?

If I haven't learned anything else, I now realize that life is all about balance. Although we often possess certain goals which are critically important for overall health and well-being, issues will often arise that are beyond our control that should take precedence at the time. There are numerous life events which are simply beyond our control. However, the key lies in how we choose to respond to these challenges when they arise. In the future, as a social worker, I will seek to not only help my clients improve their overall physical health, but I will also become more proactive in helping them to increase their mental well-being. This type of approach is referred to as integrated behavioral health. I now realize that the two are not separate components, but they are actually dual entities which cannot be viewed in isolation.

In closing, I must realize that clients are people first, and **all** aspects of their lives must be viewed with the same level of importance. Life is like a game; you never know when a curve ball is going to come your way. Therefore, I must continually remind myself that all individuals are not created the same, and certain adjustments must be embraced along the way to meet the individual needs of each client. In education, it's critically important to tailor instruction to meet the needs of each learner. Social work is no different. There is no "one size fits all" solution. I must continually strive to meet the client where he/she is at that time. If this means stopping or halting a study to effectively deal with a major life event, then bring me a whistle because I'm about to call a "time-out."

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