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ABSTRACT

The present research program began as a preliminary attempt to examine the relationship between client and treatment loci of control as a predictor of success in weight control programs. In the first phase of the research, individuals previously attempting weight loss, and the programs they had pursued, were classified as being either primarily internally-oriented or externally-oriented. Retrospective analysis of their experiences revealed more weight loss for those whose locus of control orientation was similar to that of their program. Successive replications, however, generated data suggesting that a more powerful predictive factor may be whether the individual pursued a self-directed weight management program or sought formal treatment. In particular, for the 66 college students participating in the three phases of the research, it was found that those whose weight control efforts were self-managed lost weight at more than twice the rate (2.47 pounds per week) as those who had entered formal treatment programs (1.22 pounds per week). These findings suggest the potential value of efforts to delineate factors and mechanisms involved in the successful management of habit problems. (Author)

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SELF-MANAGEMENT VERSUS FORMAL TREATMENT  
IN EFFORTS AT WEIGHT CONTROL

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This is a summary of a research report presented at the April, 1983  
Convention of the Western Psychological Association, San Francisco, California.

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The present research program began as a preliminary attempt to examine the relationship between client and treatment loci of control as a predictor of success in weight control programs (Lichtenstein & Sherman, 1982, 1983). In the first phase of the research, individuals previously attempting weight loss, and the programs they had pursued, were classified as being primarily either internally-oriented or externally-oriented. Retrospective analysis of their experiences revealed more weight loss for those whose locus of control orientation was similar to that of their program. Successive replications, however, generated data suggesting that a more powerful predictive factor may be whether the individual pursued a self-directed weight management program or sought formal treatment. In particular, for the 66 participants in the three phases of the research, it was found that those whose weight control efforts were self-managed lost weight at more than twice the rate (2.47 pounds per week) of those who had entered formal treatment programs (1.22 pounds per week). These findings suggest the potential value of efforts to delineate factors and mechanisms involved in the successful management of habit problems.

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INTRODUCTION

The common finding of individual differences in response to psychological therapies has prompted interest in identifying personality and intervention variables which might be useful for purposes of client-treatment matching. The present research program began as a preliminary attempt to examine the relationship between client and treatment loci of control as a predictor of success in weight control programs (Lichtenstein & Sherman, 1982, 1983). In the first phase of the research, individuals previously attempting weight loss, and the programs they had pursued, were classified as being primarily either internally-oriented or externally-oriented. Retrospective analysis of their experiences revealed more weight loss for those whose locus of control orientation was similar to that of their program. Successive replications, as detailed below, generated data suggesting that other factors may be more important.

METHOD

Sixty-six Introductory Psychology students, who met the following criteria, were individually interviewed about their weight loss experiences. Subjects were a minimum of 18 years of age (mean = 18.8; range = 18 - 26) and

had all attempted a weight loss program within the preceding two years at the beginning of which they had been at least 10 pounds overweight. The hour-long, semi-structured interviews, which began with the completion of several questionnaires, were conducted in three phases spanning a one-year period. A different person conducted the interviews of the 23, 23, and 20 subjects who participated in each phase, respectively.

Subject locus of control was based upon scores on the Internal-External Scale (Rotter, 1966), the Self-Motivation Inventory (Dishman, Ickes, & Morgan, 1980), and a modified version of the Health Locus of Control Scale (Wallston, Wallston, Kaplan, & Maides, 1976). Based upon their responses to these questionnaires, subjects were categorized as having primarily either an internal or external locus of control.

Treatment locus of control was determined by an internality/externality scale designed to reflect the degree of control allowed the client as opposed to that exerted by the program. These ratings were based upon the information obtained during the interviews.

#### RESULTS

Analysis of data from Phase One (Lichtenstein & Sherman, 1982, 1983) revealed enhanced weight loss for subjects whose locus of control paralleled that of their treatment. This outcome was not replicated upon reanalysis with the inclusion of data from Phase Two, although another finding emerged: Subjects whose weight control efforts were self-managed lost weight at twice the rate (2.37 pounds per week) of subjects who had participated in formal treatment programs (1.14 pounds per week),  $F(1,42) = 6.57, p < .01$ .

Table 1 presents the combined weight loss data from all three phases in a 2 by 2 categorization with subjects' loci of control as one factor and program type (self-management or formal treatment) as the other. The finding of

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Insert Table 1 about here  
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superiority for self-management over formal treatment, which was evident after Phase Two, was sustained with the inclusion of data from Phase Three: 2.47 versus 1.22 pounds per week,  $F(1,62) = 9.58, p < .003$ . No significant main effect for subject locus of control was observed (or for treatment locus of control, based on a different categorization and analysis), nor was the interaction significant.

#### DISCUSSION

Results of the present research program appear to imply that individuals wishing to lose weight would be wise to engage in some form of self-management rather than participate in a formal treatment program. While subject locus of control was not reliably predictive of individual success in efforts at weight loss, those pursuing a self-management approach lost weight at a weekly rate which was more than twice that of participants in formal treatment programs. These results are consistent with Schachter's (1982) report concerning the ability of people in the general population to self-manage habit problems, including smoking as well as obesity.

The present findings and their generality must be viewed within the perspective of possible limitations associated with the nature and homogeneity of the population and target problem, as well as the retrospective nature of the self-reports on prior efforts at weight control. Also, although the

average weekly weight loss was appreciably greater for self-management, there were some individuals who still fared better with formal treatment programs. This inter-subject variability indicates the potential value of research designed to identify further relevant client and treatment characteristics that could be used for purposes of therapeutic prescription. Clearly there is much to be gained by delineating the factors and mechanisms involved in the successful management of habit problems, for there are many people suffering from the adverse health effects of excessive smoking and eating who could benefit from advances in our behavior management methods.

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TABLE 1  
 Mean Pounds Lost per Week by Internally- and  
 Externally-Oriented Subjects in Self-Management  
 and Formal Treatment Programs

	Subject Locus of Control		
	Internal	External	
Self-	2.63	1.95	2.47
Management	n=29	n=9	n=38
Program			
Formal	1.17	1.25	1.22
Treatment	n=11	n=17	n=28
	2.23	1.49	1.94
	n=40	n=26	N=66

