

Online Supplementary Material

Sussman AL, Williams R, Leverence R, Gloyd P, Jr, Crabtree BF. The art and complexity of primary care clinicians' preventive counseling decisions: obesity as a case study. *Ann Fam Med*. 2006;4:327-333.

<http://www.annfammed.org/cgi/content/full/4/4/327/DC1>

Supplemental Appendix 4. Results of Factor Analysis of Responses to Survey Questions About Reasons for Preventive Counseling for Obesity

Survey Question	Factor Loadings		
	Factor 1 Societal Influences on Obesity	Factor 2 Clinician Sense of Duty	Factor 3 Conditions Conducive to Counseling
Eigenvalue	5.76	1.46	1.05
Variance explained by factor, %	4.94	1.74	1.58
Compared with other issues in the clinical encounter, I may choose not to spend time on counseling about obesity because:			
Patients are not receptive to discussing this topic	0.31	0.09	0.15
I don't feel it is time well spent	0.45	-0.28	0.21
I don't have much success	0.76	-0.23	0.14
It is a societal problem that my efforts have little impact on	0.75	-0.26	-0.03
Few patients are motivated to make the lifestyle changes needed	0.66	0.03	0.07
There isn't enough time	0.14	-0.03	0.63
I don't feel like I have the skills or knowledge needed to be effective in this area	0.10	-0.25	0.53
My patients generally do not have the personal or community resources to be able to deal with this	0.38	0.04	0.39
I spend time on counseling about obesity because:			
I have had some success with this in the past	-0.043	0.19	-0.19
It is recommended by clinical guidelines	-0.010	0.41	0
My patients are unlikely to hear a similar message elsewhere	0.05	0.64	-0.16
Interactions with my colleagues have influenced me to do so	-0.05	0.16	-0.02
Because of my personal belief that the non-obese have a significantly better quality of life	-0.02	0.35	-0.02

Note: Bold entries indicate those survey items that were retained in subsequent analyses of the factors.