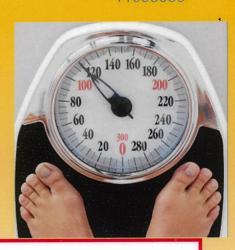


HOW CAN REGISTERED NURSES BEST APPROACH THE ISSUE OF CHILDHOOD OBESITY WITH PATIENTS AND THEIR FAMILIES?



Starter: (Introduction)

- Usually obesity is a disorder that mainly effects adults, but in the past 10 years it has been seen more commonly in children and adolescents.
- In New Zealand in 2011, 11% of children aged 2-14 years were considered obese and 22% of children were overweight. These childhood obesity statistics have increased from 8% in 2006 to 11% in 2011.
- Nurses are often the first to intervene when a patient's weight is becoming detrimental to their health

Main (Clinical Issue)

- It is important that parents and children understand the systemic effects obesity can have on their health, as children this can increase their risk of developing these diseases at an earlier age.
- Nurses need to take into consideration when addressing a patient's weight, that their mental state and perception of themselves will be influenced by external factors such as bullying. 40% of overweight people and 34% of obese people have an altered self-esteem.
- Children will learn from what they see in their environment, therefore it is important for parents to set a good example for their children.
- Nurses can provide advice and education about food choices; suggest strategies for weight management, decreasing calorie intake and increasing physical activity.
 Approach the whole family so that they can

Dessert: (Conclusion)

- Build a strong therapeutic relationship with the patient and their family before addressing their weight, the family will trust the information.
- Use tactful language, for example saying overweight rather than obese can seem less harsh when speaking with children.
- Using tools such as a growth chart or body mass index (BMI) can be easier for the parents and children to visualise as well as shifting the 'blame' from the nurse personally.
- Adapt the language used so that they can understand the effects of their weight has on their health, so that they can have the motivation to change their lifestyle.
- Obesity is such an important issue to tackle at a young age, that the pros out weigh the cons when it comes to discussing a patients weight management.

REFERENCES:

Crisp, J., & Taylor, C. (2010). Potter & Perry's Fundamentals of nursing (Vol. 3). Chatswood, NSW, Australia: Elsevier.

Edvardsson, K., Edvardsson, D., & Hornsten, A. (2009). Raising issues about children's overweight - maternal and child health nurses' experiences. *Journal of Advanced Nursing*, 2542-2551.

Epstein, S., Geniteau, E., Christin, P., Hermouet, P., Mok, E., Fournier, J., et al. (2010). Role of a clinical nurse specialist within a paediatric multidisiplinary weight management programme teammanagement. *Journal of Clinical Nursing*, 2649-2651.

Ministry of Health. (2014, 1 13). *Obesity key facts and statistics*. Retrieved 4 2, 2014, from Ministry of Health Manatu Hauora: http://www.health.govt.nz/our-work/diseases-and-conditions/obesity/obesity-key-facts-and-statistics

Rabbitt, A., & Coyne, I. (2012). Childhood obesity: nurses' role in addressing the epidemic. British Journal of Nursing, 731-735.

SEARCH QUESTION- PECOT

The clinical question that interested me was how to address children's obesity in the clinical environment and what techniques nurses could use to initiate a conversation about a patient's weight.

The primary use for the PECOT model is to deconstruct the clinical question so that it can be searched with the most appropriate literature for the research. Using the PECOT model I refined my clinical question so that I could do a primary research of literature (Schneider, Whitehead, LoBiondo-Wood, & Haber, 2013)

| PECOT category | Information relating to question | Explanation |
|-------------------------|--|--|
| Population | Children between the ages of 6-12 years, who are overweight/obese. | The age where a child's eating habits becomes more routine and heavily influenced by their environment. |
| Exposure (Intervention) | Obese children who have had their weight addressed by a nurse and have received support for weight management. | I want to see what nursing interventions are effective at focussing the patient on their weight problem. Especially as it is a difficult topic to bring up. |
| Comparison/Control | Obese children who have not had nursing intervention to address | If no nursing intervention was taken, what outcome would it have on the |

| | their weight. | child's wellbeing. |
|---------|------------------------------|-----------------------------|
| Outcome | Effective weight | To reduce the risk of |
| | management for obese | children developing |
| | children and their families. | avoidable diseases in the |
| | | future and to decrease the |
| | | detriment to their health |
| | - | status. |
| | | |
| Time | Ongoing | Children will carry their |
| | , | relationship with food into |
| | | their adult years, |
| | | therefore effective weight |
| | | management will be an |
| | | ongoing goal. |
| | | |

By using the PECOT model I was able to decide on relevant articles from my inclusion and exclusion criteria that I had decided before my search. I found that there were a lot of articles about childhood obesity as it is a common issue in primary health care, so I had to filter articles that were specific to nurses addressing the issue with their patient.

REFERENCES:

Schneider, Z., Whitehead., D. (2013). Identifying research ideas, questions, statement & hypotheses.

In Z. Schneider, D. Whitehead, G. LoBiondo-Wood, & J. Haber. Schneider, Z., Whitehead., D.

Nursing and midwifery research methods and appraisal for evidence – based practice (4th ed.). (pp. 57-76). Sydney, Australia: Mosby.