

Childhood Obesity Prevention Programmes

“What are the outcomes of interrelated community and school based prevention programs for children to reduce the rate of childhood obesity?”



Figure 1. Moving person (Ministry of Health, 2016)

Introduction

The prevalence of childhood obesity is increasingly alarming, both in New Zealand and globally as it is putting stress on all areas of healthcare.

85,000 New Zealand children are obese, while 170,000 are overweight (Ministry of Health, 2017).

There are multiple factors which contribute to this problem, making it one of a sociological nature; a public health issue not a personal choice.

Interrelated community and school based prevention programs are used to reduce the rates of childhood obesity, throughout primary health care.

Implications for practice

Health consequences of obesity on children are major, some of which continue through into adulthood.

The impact of the home environment and parental influence on a child's diet is significant, contributing to the prevalence of obesity now and potentially into the future.

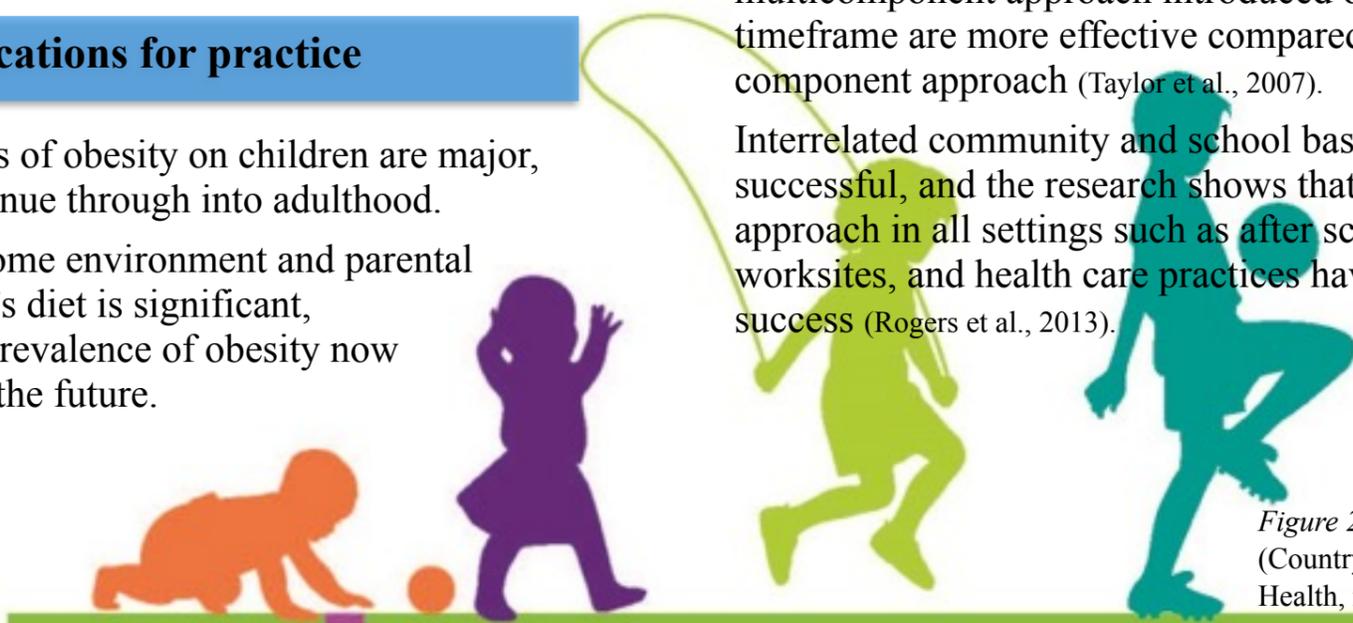


Figure 2. Four children (Country of Los Angeles Public Health, n.d.)

Recommendations

- Social marketing campaigns, could be used more frequently, as a way of targeting a large population base.
- Increase obesity prevention education in early childcare settings and primary schools on a national scale.

Conclusion

Outcomes of interrelated community and school based prevention programs are positive, with possible interventions for future development.

As society is constantly changing, so is the obesogenic environment that we live in, so prevention programs are vital to manage childhood obesity.

The literature clearly outlines in reducing childhood obesity, as a society we need to take a holistic approach through professional development, and skill based programs to educate and address what is occurring now, and in the near future.

Literature Review

A systematic review of the literature, identified outcomes of interrelated community and school based programs.

Many programs have had success in respect to biological, environmental and behavioural change, whereas only a small portion have had success in reducing childhood obesity longterm.

Studies show that staff members who participate in professional development benefit from this process as many do not feel competent prior to competing the program.

Community and school based programs that have a multicomponent approach introduced over a two year timeframe are more effective compared to a singular component approach (Taylor et al., 2007).

Interrelated community and school based programs are successful, and the research shows that using a holistic approach in all settings such as after school programmes, worksites, and health care practices have even greater SUCCESS (Rogers et al., 2013).

References

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