Turning the obesity tide

New program targets children

MORE than half the population in Warrnambool and Moyne are overweight or obese, a workshop in Port Fairy has been told.

Warrnambool mayor Jacinta Ermacora also told the workshop for the South West Healthy Kids program that obesity was one of the region’s biggest community health challenges.

At the current rate of increase for obesity, 63 per cent of young Australians would be overweight or obese by 2020, she said.

The South West Healthy Kids program aims to tackle obesity by changing school and other neighbourhood spaces to help children make healthy eating decisions and be active.

The program, an alliance between schools, community and health agencies and local government, is aimed at children aged three to 12 years and their families.

Southwest Primary Care Partnership health promotions officer Karyn Knight said the workshop was presented with the findings of a survey that examined the physical activity and eating habits of six communities.

Ms Knight said the findings of the survey, which studied schools, pre-schools and sports clubs in Warrnambool, Kororai, Port Fairy, Macarthur, Hawkesdale and Mortlake, would be used to determine an action plan.

“To change lifestyles we need the support of the way neighbours and communities are shaped so it is easier not to eat rubbish and be slothful on the couch,” Ms Knight said. She said local government was a key player because it was a provider of recreational opportunities.

Cr Ermacora said local government was obliged to be involved in the program.

“As a city, we can only ever be as strong as the least among us. “We can’t claim success as a community without being honest about the fact that not all members of our community are able to share in the economic and lifestyle benefits of our current boom.

“There is plenty of evidence that providing active transport opportunities and better parks and gardens are influential to healthy lifestyles,” Cr Ermacora said.

The mayor also highlighted the benefits of improving the walkability of streets and neighbourhoods through planning, as well as pedestrian safety measures and advocating for funding to support local organisations such as schools.
The Health Promotion Process

- Situation Analysis
- Prioritisation
- Planning
  - Aims (overall goal)
  - Objectives (what will be achieved)
  - Strategies (how they will be achieved)
  - Actions (what will be done, by whom, by when)
- Implementation

Capacity building
- Skills/knowledge
- Structures/Relationships
- Funding/resources

Evaluation
- Formative
  - Process
- Impact
- Outcome
- Dissemination
ANGELO Process

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1. Situation analysis

2. Scan
- Behaviours
- Knowledge and Skills
- Environments

3. Prioritise
- Importance
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4. Merge
- List of potential targets for action plan

5. Formulate
- SMART format
- Action Plan

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Situation analysis

- Size of problem
- Nature of the problem – especially local contexts
  - Who, where, when, why
  - You have great data here
- Existing activities, organisations, champions
- Future options
  - Opportunities
  - Capacity
- International literature and experiences
ANGELO Process

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Choosing target behaviours

- Draft list of potential behaviours, knowledge/skills gaps and environmental barriers is worked up before workshop
  - add others to list if needed

- Scan potential behaviours to change
  
<table>
<thead>
<tr>
<th>Decrease</th>
<th>Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>TV viewing</td>
<td>Active play</td>
</tr>
<tr>
<td>Screen games</td>
<td>Active transport</td>
</tr>
<tr>
<td>High fat/sugar snacks</td>
<td>Active recreation/sport</td>
</tr>
<tr>
<td>Fast foods</td>
<td>Fruit</td>
</tr>
<tr>
<td>High fat meals</td>
<td>Vegetables</td>
</tr>
<tr>
<td>High sugar drinks (incl fruit juice)</td>
<td>Whole grain cereals</td>
</tr>
<tr>
<td>Water</td>
<td>Breastfeeding</td>
</tr>
</tbody>
</table>
Scan potential behaviours

- Check the potential **target behaviours** already listed
- Add others to the list if needed
## STEP 1: BEHAVIOURS

What are the behaviours that are the highest priority for action?

**Importance** (what is the relevance and impact of this in our situation?)

1 = not important at all  
2 = a little important  
3 = somewhat important  
4 = very important  
5 = extremely important

**Changeability** (how easy or hard is this to change?)

1 = very hard to change  
2 = hard to change  
3 = possible to change  
4 = easy to change  
5 = very easy to change

<table>
<thead>
<tr>
<th>List of potential behaviour patterns to target</th>
<th>Score (use whole range of scores)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Importance 1-5</td>
<td>Changeability 1-5</td>
</tr>
<tr>
<td>1. Increase the number of women who choose to breastfeed</td>
<td></td>
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<tr>
<td>2. Extend the duration of breastfeeding</td>
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<tr>
<td>3. Increasing the amount of vegetables eaten</td>
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</tbody>
</table>
Prioritising behaviours

- Individually score each behaviour item on importance and changeability

Importance (score 1-5)
  - How relevant is it and how big an impact would a change make?

Changeability (score 1-5)
  - How amenable is the factor to change?

Use the full range of the scale
Prioritise: Moving to a shorter list

- Feasibility
- Sustainability
- Acceptability
  - parents, children, professionals, funders, organisations etc
- Affordability
- Cost-effectiveness

‘Changeability’

- Relevance
- Effectiveness
- Reach
- Effects on equity
- Other positive effects
- Other negative effects

‘Importance’
Choosing related knowledge and skills

**Knowledge**
- Fruit juice - high sugar
- High energy snacks
- Value of whole grains
- Value of drinking water
- What serving sizes
- How much TV/screen
- How much PA
- Offering new foods

**Skills**
- Cooking
- Fundamental motor skills
- Traffic safety
## ANGELO Framework (Analysis Grid for Environments Linked to Obesity)

<table>
<thead>
<tr>
<th>Environment type</th>
<th>Micro-environment (settings)</th>
<th>Macro-environment (sectors)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Environment size</td>
<td></td>
</tr>
<tr>
<td>Physical</td>
<td>What is available?</td>
<td></td>
</tr>
<tr>
<td>Economic</td>
<td>What are the financial factors?</td>
<td></td>
</tr>
<tr>
<td>Policy</td>
<td>What are the rules?</td>
<td></td>
</tr>
<tr>
<td>Socio-cultural</td>
<td>What are the attitudes, beliefs, perceptions and values?</td>
<td></td>
</tr>
</tbody>
</table>

Swinburn et al Prev Med 1999
Environment types

- Physical – what is available?
  - Includes expertise, training programs etc as well as obvious physical factors

- Economic – what are the financial factors?
  - Incomes (eg Sport & Rec budget, canteen profits)
  - Costs (eg to use rec facilities, buy healthy lunch)
Environment types

- **Policy** – what are the rules?
  - Legislation, regulation (& their interpretation and enforcement), formal policies, informal policies, rules (eg home and school)

- **Socio-cultural** – what are the attitudes, perceptions, values and beliefs?
  - External to the individual
  - Includes media/marketing messages
ANGELO Process

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WHO Collaborating Centre for Obesity Prevention
Prioritise

1) **Individually** score each behavior item on **importance** and **changeability**
   - Importance (score 1-5) How relevant is it and how big an impact would a change make?
   - Changeability (score 1-5) How amendable is the factor to change?

Calculate Total score = Importance $\times$ Changeability

Allocate points:

1. **Highest score** $\ldots$ 5 points      Note: No
2. $\ldots$ 4 points            ties allowed
3. $\ldots$ 3 points
4. $\ldots$ 2 points
5. $\ldots$ 1 point

2) **Group** score: Add individual points together for each behaviour
   Highest score = highest priority
1. Situation analysis

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**Merge**

- From the group scores list the top priorities in each of the three areas
  - Behaviours
  - Knowledge and Skills
  - Environments – by each setting
- About 6-8 in each

<table>
<thead>
<tr>
<th>Behaviours</th>
<th>Know/Skills</th>
<th>Home enviro</th>
<th>School enviro</th>
<th>N’hood enviro</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
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<td>2.</td>
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<td>5.</td>
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<td>6.</td>
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</tbody>
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Session outline

1. The priority setting process
2. The ANGELO process
3. Developing an action plan
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Action Plan

- Overall aim
  - Simple, broad statement about the overall goal of the program

- Objectives
  - What will be achieved
  - Typically 8-10 objectives
    - 4-5 objectives from target Behaviours
    - Guiding objectives of capacity building, social marketing, evaluation
  - SMART (Specific, Measurable, Achievable, Relevant, Time-bound)

- Strategies
  - How the objectives will be achieved
  - Knowledge/skills, environmental elements as strategies

- Action steps
  - Who will do what, by when, and what stage is it at
  - Living document
Example

- Target: Children 5-12 years old
- Aim: To improve the health and wellbeing of 5-12 y.o. and strengthen the community through healthy eating and physical activity promotion
- Objectives:
  - To achieve a high awareness of the healthy eating/physical activity messages among parents and children
  - To build community capacity to promote physical activity and healthy eating
  - To evaluate the process, impact and outcomes of the project
  - To significantly decrease the time spent watching TV & playing on computers or electronic games
  - To significantly decrease the consumption of high sugar drinks and to promote the consumption of water
  - a. To investigate the potential for improving the quality (fat content and type of fat) of deep-fried chips
  - b. To improve the quality of deep-fried takeaway chips
  ...
# Objective Five: Water versus Sweet Drinks

To significantly decrease the consumption of high sugar drinks and to promote the consumption of water

<table>
<thead>
<tr>
<th>Strategies</th>
<th>Action steps</th>
<th>By Who</th>
<th>Time line</th>
<th>Status</th>
<th>Process Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.1 School Canteen &amp; Vending Machine Policies</td>
<td>Examine Baseline Data (inc. socio-cultural information, environmental school audits)) Audit current settings eg. whether there are existing Policies, vending machines and product Research beyond the intervention settings for existing programs, policies, practice in relation to water and sweet drinks etc</td>
<td>PW</td>
<td>April 06</td>
<td>✔</td>
<td>Results of research documented</td>
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<td>PW/Princ</td>
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<td>Results of research documented</td>
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<td></td>
<td>PW</td>
<td>July 06</td>
<td>✔</td>
<td>Number of programs, polices practice sourced and documented</td>
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