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Lewis, Kiara

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# Using evidence to inform practice to tackle child obesity

Kiara Lewis



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Inspiring tomorrow's professionals



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# Kiara Lewis



- Head of Division of Health and Wellbeing
- PhD children's adherence to physical activity
- Empirical research through evaluation of a community scheme for overweight and obese children and young people.

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# 4 Key Questions

1. Are obese children less active than non obese?
2. Does it matter if they are less active?
3. If they are less active why?
4. How can we increase activity levels?

# 1. Are obese children less active than non obese?

- Yes – majority of obese children in lowest fitness categories<sup>1</sup>
- Globally fitness in children < 4.3% per decade<sup>2</sup>
- Inactivity and obesity interrelated

# By how much?

- Obese boys were found to be 15% less active on schooldays and 29% less active on weekends compared to non-obese boys<sup>3</sup>
- Obese and non-obese girls' activity levels were even greater, obese girls were 20% less active on schooldays and 36% less active on weekends<sup>3</sup>

## 2. Does it matter if they are less active?

- Yes
- For health CRF more important than obesity<sup>4</sup>
- CRF linked:
  - Total adiposity and abdominal adiposity
  - CV risk factors
  - Mental well-being

# 3. If they are less active why?

- Children participate<sup>5</sup>:
  - Enjoy
  - Feel competent
  - Not forced to compete
  - Feel supported by others

# Overweight and obese young people:

'This is not fun'

'I'm not good  
enough'

'I will let  
the team  
down'

'This will hurt'

'It will make my  
asthma worse'

### 3. If they are less active why?

- Overweight and obese<sup>6,7</sup>:
- Some similar and some distinct barriers
  - May find activity harder – tire easily
  - May have potential physical/skill limitations
  - May have lower confidence, poor body image
  - May have fewer social networks

# 4. How can we increase activity levels?

- Cochrane Review of school based initiatives<sup>8</sup> – no evidence for adolescence
- Many studies whole school approach – so as not to stigmatise obesity – BUT different barriers
- My evidence!

# What Evidence?

- Evaluation of a community programme to increase physical activity in obese and overweight young people<sup>9</sup>
- 2 year evaluation
- 325 young people
- 60% BMI  $\geq$  98 centile

# What happened to weight?

- Sub sample (90 children before and after weight)
- **97%** same or better weight category



# How did they feel?

➤ 72% Increase self esteem



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# What about physical activity levels?

- 60% increase activity levels
- 46% tried new activities
- More active outside of sessions



# Great - But why?

- Interviews/focus groups involving 50 children and young people
- Thematic analysis of why they were more active

# What these children and young people said:



'The more times I came the more confident I got'

'I feel fitter and happier'

'I like people what come to the sessions '

'It's fun, energetic, it tires you out and it's healthy'

'I've made lots of new friends'

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# What is the difference<sup>10</sup>?

- Choice of activities
- Wear their own clothes
- Personal goals
- Age and ability appropriate
- No embarrassing PE skirt
- Not comparative, no fear of letting others down

# What is the difference?

- Activity intensity controlled by the child
- Other children at a similar level
- Feel good about themselves
- No fear of exhaustion/pain
- Don't feel bottom of the class
- Supportive feedback from instructors

# Key Messages

- Promote participation not excellence
- Promote social skills not just physical skills
- Show respect and compassion for children not strict discipline
- Emphasise fun not weight loss or health
- Provide appropriate choice of clothing and changing facilities
- Positive experience during activity  
parents/instructors/teachers influence this

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# What to know more?



- [kiara.lewis@hud.ac.uk](mailto:kiara.lewis@hud.ac.uk)

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