

Changes in psychosocial outcomes reported in behavioural intervention trials for children and adolescents living with overweight and obesity: A scoping review

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Background:

Many children and adolescents living with obesity have co-occurring psychosocial conditions, which may be impacted by obesity treatment [1]. Past systematic reviews have shown positive effects for specific psychosocial outcomes, such as improved eating behaviours and quality of life following behavioural interventions for the treatment of paediatric obesity [2, 3]. This review aimed to extend these findings by mapping patterns of change for the totality of psychosocial outcomes reported in behavioural intervention trials for children and adolescents living with obesity.

Methods:

We conducted a scoping review following PRISMA-ScR guidelines. Eleven databases were searched to identify behavioural intervention trials for children and adolescents living with overweight or obesity, that measured at least one psychosocial outcome pre- and post-intervention. Outcomes were grouped into constructs thematically, and data was synthesised based on the timepoint (post-intervention, latest follow-up), intervention arm (active, no-intervention control), and type of change reported (difference between arms, change over time).

Results:

Of 1172 articles screened, 197 articles (169 trials) met inclusion criteria, with a combined sample of 18,694 children and adolescents. A total of 372 psychosocial outcomes were identified and grouped into eight constructs. Across all outcomes and timepoints, most trials reported no difference, or a difference favouring the active intervention arm over the no-intervention control arm. Similarly, most active intervention arms showed improvements or no change over time, though five of 169

trials reported worsening in a psychosocial outcome post-intervention. Most no-intervention control arms showed no change over time.

Conclusion:

Behavioural interventions are associated with improvements, or no change in psychosocial health across a broad range of outcomes assessed. Consensus on core psychosocial outcomes is needed to reduce heterogeneity and ensure outcomes are relevant to children and adolescents living with obesity.

References:

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