|  |
| --- |
| **The conversation starter approach to addressing childhood obesity at the Before School Check (B4SC** |
| **Health promoting objectives**Excess weight in childhood is predictive of adiposity in adulthood, and an increased risk of morbidity and premature mortality. Throughout NZ, obesity prevalence is higher in Māori, Pacifica and low income groups.The immediate aim of the tool is to initiate conversations with families regarding healthy weight and active lifestyles. The long term aim to reduce childhood obesity.**Description of the artwork**A large format flipchart (the tool) with interpretative pictures for use at the Before School Check (B4SC) to support families/whānau understand and recognise appropriate age-related portion sizes for family meals. Suggested questions for the practitioner are embedded on the back of resource to focus attention on the imagery for interpretation. **Intended audience**4 year old children and their whānau/caregivers undertaking a B4SC. **Duration and intended use**The tool integrates a Ministry of Health (MoH) required clinical assessment for Body Mass Index (BMI) with imagery to provide an interpretative, appealing and engaging conversation starter. The tool was developed to facilitate the requirement that 95% of obese 4 year olds who had a BMI over 18.3kg/m2, 98th percentile identified at the B4SC from July 1 2016 to be referred to a health care professional and a family based programme. B4SC practitioners indicated that to initiate healthy weight conversations in a setting with both child and whānau/caregivers present, within the context of cultural backgrounds and levels of health literacy; they required prompts about ‘how to have the conversation’, ‘when to have the conversation’, and ‘how to make this fit’ seamlessly into the comprehensive other health assessments required.Interventions are monitored via referrals but also the reaction and suitability of the resource to engage and encourage healthy weight conversations. Since the implementation of the tool, referrals have more than trebled from 27% to 95% in a 12 month period. Feedback has indicated the images are considered ‘powerful and effective as non-judgemental conversation starters’ and they largely encourage family engagement. The tool has been widely implemented and tested through clinical practice, shared with practitioners nationally and commended by the MoH. The tool supports practitioner skills, provides interpretative evidence-based nutrition messaging and has been shown to support information transfer from clinical assessment to behaviour change across ethnicities.  |