

Multidisciplinary intervention for children and adolescents with overweight and obesity and their families

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Introduction

Obesity is an important public health problem of the modern world. The covid 19 epidemic amplified this situation by increasing the incidence of overweight and obesity for more than 20 % in the last year in children and adolescents in Slovenia. The intensive family intervention to support the healthy life style of children and their families was implemented in 27 health centres.

Methods

On the basis of the results of the pilot project carried out in the school year 2018/19 with 5511 school children age 9 and 12 years included in the upgraded preventive health checks, the exact protocol was implemented at primary health care level. The detection of overweight and obesity was carried out at periodic health checks. A detailed information about child health and the life style was collected using psychological SDQ and the nutrition CEBEQ questionnaires and the results of the National SloFIT Physical Fitness Screening as well as physical examination. The primary care paediatrician coordinated and led the team that carried out the intervention. The team included a psychologist, a dietitian, a kinesiologist and a nurse. The individual plan was prepared for each child and his/hers family and the goals of the intervention were set. Intervention consisted of individual and group sessions and practical workshops that focused on physical activity, healthy diet, regulation of sleep rhythm, the use of electronic devices and social media and psychological support and motivation. To strengthen the cooperation of the local health care services with the schools and local community to support children and their families in long-lasting lifestyle change, the team coordinated with the school staff regarding school meals and additional physical activity and also with the local community to ensure there were facilities and activities for the family in the local community. The role of local sport clubs and societies was particularly important during the summer holidays to ensure active and healthy lifestyle and motivation for change.

The children with obesity-related health risks and potential complications were referred to specialist at hospital level, according to exact protocol. The hospital treatment with a 14 day starting program and follow up was offered to these children.

Conclusion

The information from the pilot project guided the design and development of lifestyle interventions which were implemented in 27 health centres in the last year. The project became the part of Slovene strategy for addressing the consequences of the covid-19 epidemic. The results of the programme will be reported in the following years.

School Nurses (SN) at Public Schools in Brandenburg/Germany – an Effective Resource for School Children’s Health - Analyses of their Activities and Networking

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Introduction

The study analyses the activities of 18 school nurses at 23 schools (primary and secondary schools during a 3-year period (02/2017- 03/2020), a model project under the umbrella of the AWO Bezirksverband Potsdam e.V., in the German state of Brandenburg (<https://schulgesundheitsfachkraft.de/abschlussberichte-dokumente/>). The data is extracted of a standardised documentation system encompassing a variety of items related to the school nurse’s core tasks: health care for school children with health disorders, injuries or chronic diseases, health promotion on individual and population level. The second part of the report investigates the type and content of community-based co-operations (network map), if specific health care or psychosocial support for a school child was needed.

Main results

school nurses are frequently visited by school children because of mental and physical health problems. School nurses spend an average of 4 hours providing individual health care in schools, in terms of a ratio one SN per 700 school children. 87 % of school children could return to class after school nurse’s visit. Unnecessary emergency operations could be reduced because school nurse could assess the emergency incident. Each school nurse was co-operating with an average of 20 stakeholders in the community and thus could refer to specialised care or psychosocial support, if needed.

Conclusion

Whilst improving health of school children, school nurses contribute extremely to their education chances. Community networking is crucial for a successful case management.