**

# Obesity

# Pupils with Health Issues

**Obesity**

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| **classroom_tip** | **Classroom-based tips (focus on instructional methods)** |

1. **Encourage the social integration of pupils through organising work in small groups for carrying out projects on healthy eating, and exercises** in the context of a science or health class. Keep the emphasis on health rather than weight.
2. **Promote activities helping pupils express themselves physically and emotionally** through dance, music and drama, which allow for body movement with an aim to gain control of the body, and improve body image.
3. **Be vigilant in order to recognise signs that a pupil is being bullied** so that an appropriate interventions are made.
4. **Encourage pupils to talk about feelings and plan activities that will enhance pupils’ emotional intelligence,** and encourage feelings of empathy and kindness. Such activities might include ‘circle time’, taking care to avoid discussion or personal comments on pupils or their families and personal issues.
5. **Organise activities that promote healthy weight and healthy lifestyle choices in ways that do not embarrass or single out overweight or obese pupils.** For example, use healthy treats as rewards, adopt an edible classroom plant, introduce unusual healthy foods in a dedicated lesson, assign a food-related book in book reading, create research assignments and debates on food-related topics.
6. Be mindful about the use of inappropriate language and stereotypes regarding body weight, body image and beauty.

Adapted from: K-12 News, Lessons & Shared resources by teachers for teachers

<http://www.teachhub.com/fighting-childhood-obesity-your-classroom>

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| **school_tip** | **School-based practical tips (focus on instructional methods)** |

**Community**

**Increase pupils’ participation in collective social activities in order to improve ties with their school peers and the community.** These activities can place emphasis on physical activity, such as organisation of sports activities.

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**Curricular Adaptations**

Implement a high quality course of study in physical education as part of a school policy on prevention and treatment of obesity

**Educational Visits / Field Trips / Camps / School Exchanges / Trips Abroad**

Arrange more outdoor activities, and excursions in nature as part of a school policy on prevention and treatment of obesity

**Food: Canteen / Visits / Camps / Trips**

**Make sure the school canteen or cafeteria stocks appealing healthy snacks and limits unhealthy snacks**. Implement canteen or cafeteria rules wherever these apply.

[Reference: The role of schools in preventing childhood obesity (2004)

<https://www.cdc.gov/HealthyYouth/physicalactivity/pdf/roleofschools_obesity.pdf>]

**Other (Health Measures and Policy)**

1. Arrange more outdoor activities, and excursions in nature as part of a school policy on prevention and treatment of obesity
2. Implement a high quality course of study in physical education as part of a school policy on prevention and treatment of obesity

**Parents / Parents’ Associations**

Talk about obesity and its impact on pupils’ psychological wellbeing and academic performance in Parents and Teachers’ Association meetings.

**Scheduling Events**

1. **Increase pupils’ participation in collective social activities in order to improve ties with their school peers and the community.** These activities can place emphasis on physical activity , such as organisation of sports activities.

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1. **Liaise with psychologists and health experts to monitor pupils’ mental and physical health**. Organise lectures or campaigns to raise awareness among staff and pupils on the issue of obesity and overweight and related issues such as social marginalisation, bullying, body image and mental health issues.

[Reference: The role of schools in preventing childhood obesity (2004)

https://www.cdc.gov/HealthyYouth/physicalactivity/pdf/roleofschools\_obesity.pdf]

**School Celebrations / Events / Activities**

1. **Increase pupils’ participation in collective social activities in order to improve ties with their school peers and the community.** These activities can place emphasis on physical activity , such as organisation of sports activities.

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1. **Liaise with psychologists and health experts to monitor pupils’ mental and physical health**. Organise lectures or campaigns to raise awareness among staff and pupils on the issue of obesity and overweight and related issues such as social marginalisation, bullying, body image and mental health issues.

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**Pupil Support**

**Liaise with psychologists and health experts to monitor pupils’ mental and physical health**. Organise lectures or campaigns to raise awareness among staff and pupils on the issue of obesity and overweight and related issues such as social marginalisation, bullying, body image and mental health issues.

[Reference: The role of schools in preventing childhood obesity (2004)

https://www.cdc.gov/HealthyYouth/physicalactivity/pdf/roleofschools\_obesity.pdf]

**Teacher Professional Development**

1. **Liaise with psychologists and health experts to monitor pupils’ mental and physical health**. Organise lectures or campaigns to raise awareness among staff and pupils on the issue of obesity and overweight and related issues such as social marginalisation, bullying, body image and mental health issues.

[Reference: The role of schools in preventing childhood obesity (2004)

<https://www.cdc.gov/HealthyYouth/physicalactivity/pdf/roleofschools_obesity.pdf>]

1. **Talk about obesity and its impact on pupils’ psychological wellbeing and academic performance in Parents and Teachers’ Association meetings.**

**Timetabling**

**Allow more breaks during the school day to encourage physical activity** as part of a school policy on prevention and treatment of obesity

[References: K-12 News, Lessons & Shared resources by teachers for teachers

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The role of schools in preventing childhood obesity (2004)

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**Supportive literature**

**Definition**

According to the World Health Organisation (WHO) overweight and obesity are defined as ‘*abnormal or excessive fat accumulation that may impair health’*.

Body mass index (BMI) is a simple index of weight-for-height that is commonly used to classify overweight and obesity in adults. It is defined as a person's weight in kilograms divided by the square of his height in meters (kg/m2).

BMI provides the most useful population-level measure of overweight and obesity as it is the same for both sexes and for all ages of adults. Specifically, for children aged 5-19 overweight and obesity are defined as follows:

*‘overweight is BMI-for-age greater than 1 standard deviation above the WHO Growth Reference median’*

*‘obesity is greater than 2 standard deviations above the WHO Growth Reference median’*

Charts can be found at: <http://www.who.int/growthref/who2007_bmi_for_age/en/>

Childhood obesity is associated with a higher chance of obesity, premature death and disability in adulthood. In addition, obese children experience breathing difficulties, increased risk of fractures, hypertension, early markers of cardiovascular disease, insulin resistance and psychological effects.

**Literature review**

It has been observed and reported in the literature that overweight and obese children have a lower self-esteem (Strauss et al, 1985) and might be suffering from depression (Erikson et al, 2000). Furthermore, it has also been suggested that overweight children and adolescents are more likely to be socially isolated, thus exacerbating the social and emotional consequences of obesity and overweight (Strauss and Pollack, 2003). Other studies have shown that overweight children and adolescents are more likely to be described in contemptuous terms or ranked as the least desirable friends. This phenomenon has been documented since the 1960s and known to appear in all cultures (Richardson et al, 1961). Since peer appearance norms are especially important in adolescents, overweight and obese adolescents might be losing out on friendships, (George & Hartmann, 1996).

Moreover, studies have shown that negative weight-related stereotypes are held by teachers at every stage of the school system, from kindergarten upwards (Puhl & Latner, 2007). A recent study looking at the academic ability of 3,362 children in the US discovered that an increase in BMI was significantly associated with worsening teacher perceptions of both boys and girls. (Kenney et al, 2015).

Weight-related teasing or bullying, might also contribute lower academic performance of obese or overweight children and adolescents (Krukowski et al, 2009). Bullying ruptures healthy self-esteem and in the long-term can lead to body dysmorphic disorder (an anxiety disorder that causes people to have a distorted view of their appearance and to spend a lot of time worrying about it), social anxiety disorder (an anxiety disorder that causes people to be terrified of socialising with others, fearing harsh evaluation and rejection), depression, self-harm, and suicide ideation. (Eisenberg et al, 2003). A recent study even suggests that bullying has similar or worse long-term effects on young adults’ mental health than abuse or neglect (Lereya et al, 2015).

**Websites and EU Reports**

World Health Organisation Obesity and Overweight

<http://www.who.int/mediacentre/factsheets/fs311/en/>

World Health Organisation Report on Ending Childhood Obesity (2016)

<http://apps.who.int/iris/bitstream/10665/204176/1/9789241510066_eng.pdf?ua=1&ua=1>

The role of schools in preventing childhood obesity (2004)

<http://www.cdc.gov/HealthyYouth/physicalactivity/pdf/roleofschools_obesity.pdf>

***References***

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