

## AUSTRALIAN PRIMARY HEALTH CARE RESEARCH INSTITUTE

### CHILD HEALTH PROMOTION RESEARCH CENTRE

# PREVENTING OVERWEIGHT AND OBESITY IN YOUNG CHILDREN

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## POLICY CONTEXT

Today, 3.24 million Australians are estimated to be obese. Without effective preventative programs, particularly among young children, this figure could rise to 7.2 million by 2025. This review provides practical information on successful and/or promising interventions that strengthen the primary health care response, through the promotion of healthy weight among young children aged two to six years. It reviews the policy implications of implementing these in different settings.

## KEY FINDINGS

- There is a major gap in developing programs aimed at reducing obesity in children aged between two and six years, despite national and international calls for multi-component, population-focused interventions. Initial evidence highlights the value of focusing on this age group prior to the onset of poor eating habits and sedentary behaviours.
- The importance of understanding and addressing the key barriers to effective engagement between parents and primary health care (PHC) providers, including:
  - i. Systems level barriers: lack of time, resources and patient reimbursement and the need to work across different departmental jurisdictions;
  - ii. Attitudinal barriers - health professionals associating overweight with over indulgence, laziness and even poor hygiene, leading to victim blaming rather than understanding the problem within the broader environmental context;
  - iii. Communication barriers - parents receiving conflicting messages and feeling unable to speak openly about the issues of greatest concern to them;
  - iv. Knowledge, skills and training barriers with PHC providers not proficient in behaviour management and parental guidance techniques and with few educational resources to support them;

- v. Research barriers - including lack of rigorously evaluated studies on the effectiveness of different interventions; and
- vi. Organisational/coordination barriers - few tools available for reaching and influencing independent practices. There is also limited collaboration between practices and designated outreach clinics, allied health care providers and professionals working in child care and community settings.
- There is value in synthesising evidence on promising interventions. This report reviews [11 promising interventions](#) for use in different clinical, child care and home and community-based settings. It appraises them according to their ability to engage PHC providers, enhance parent participation, promote a broader population based approach and encourage primary health care providers to become involved in more upstream activities. Of the interventions three were developed in clinical settings, five in child care settings and three in home and community settings.

## POLICY OPTIONS

There are [11 promising interventions](#) being used around Australia. They need to be assessed based on the capacity to address [key barriers](#).

There are also [potential strategies for co-ordination](#), [capacity building](#), [monitoring](#) and [evaluation](#) for their effective implementation.

There is a need for a new [conceptual framework](#) that rethinks our present emphasis on interventions directed primarily towards secondary prevention and treatment of overweight among school aged children: a model to place emphasis on prevention models for ages two to six.

## METHOD

Multiple forms of evidence were examined as part of this systematic review including:

- Evidence on the effectiveness of local interventions, taking into account their replicability, political feasibility, community acceptability and service delivery needs;
- Evidence on the impact of different interventions in terms of modifying behaviour and reducing associated health risks in specific population groups;
- Evidence on processes for mobilising change among primary health care providers, parents and other child care providers in different settings based environments; and
- Evidence on the cost-effectiveness of proposed initiatives and interventions.

For more details, go to the [full report](#)

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