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Title

The ”We Act – together for health study”: Results and experiences from developing and implementing a multicomponent health promoting school intervention in four municipalities in Denmark

Type of presentation

Oral presentation of research, either under headline 6 or 8:

6) Disease prevention and health promotion in local environments
8) Cross sectional health planning

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List of key words

Health Promotion, Schools, Physical Activity, Healthy Eating, Cross Sectional Cooperation.

Background

The foundation for health is created in childhood, while actions to impact on child health are largely found outside the health sector.[i] The school is an obvious setting for health promotion among children and a partnership between Health and Education sector in local governments seems obvious and necessary.[ii] However, the core goal of Education is not health, and vice versa, thus collaboration is a challenge.[iii] This presentation will focus on results and experiences from a health promoting school intervention with goals of contributing to child health and a healthy school environment.

Theoretical Framework and Methods

The intervention was designed following principles of the health promoting school[iv] and democratic health education, including the IVAC model (Investigation, Vision, Action, Change)[v]. It comprised the following educational components 1) Lunch meal habits integrated into science and Danish (“IEAT”) 2) Physical activity integrated into maths (“IMOVE”), 3) Vision workshop integrated primarily into Danish, and 4) Action and Change process at class and school level.

The goals and outcome measures were children’s physical activity, healthy lunch meal, action competence and wellbeing. A quasi-experimental study design with 4 intervention schools and 4 matched control schools was conducted. In total 658 school children participated. The baseline data were collected in October/November 2015 and the follow-up in May/June 2016. The intervention was implemented by Danish and Maths teachers in 12 classes, of which nine were grade 5 and three were grade 6. A process evaluation was carried out to examine how

each component was received and implemented, to detect the influencing contextual factors and to identify challenges to the program implementation.

Results and conclusion
Preliminary findings indicate that the educational components were welcomed and implemented nearly as proposed in most classes. However, the diffusion of actions from the classroom to the school level was difficult and therefore environmental changes were few. Effect on individual child level will be presented in the conference.

Significance for research, policy and practice going forward
This study highlights the challenge of integrating health in a busy school practice in Denmark, despite a strong policy focus in the recent school reform on physical activity and wellbeing.

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[i] Diderichsen et al. The Danish Review on Social Determinants of Health, *Scandinavian Journal of Public Health,* 40(8 suppl): 12-105, 2012.

[ii] Langford et al. The WHO Health Promoting School framework for improving the health and well-being of students and their academic achievement. *Cochrane Database Syst Rev*. 2014;4.

[iii] Young (2005). Health promotion in schools - a historical perspective. *Promotion & Education*, *12*(3-4), 112-117.

[iv] Rowling & Samdal. (2011). Filling the black box of implementation for health-promoting schools. *Health Education*, *111*(5), 347-362.

[v] Carlsson & Simovska. (2012). Exploring learning outcomes of school-based health promotion--a multiple case study. *Health Education Research*, *27*(3), 437–447.