

INTERNATIONAL AFFAIRS & BEST PRACTICE GUIDELINES CENTRE

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INTERNATIONAL
AFFAIRS & BEST PRACTICE
GUIDELINES CENTRE

Primary Prevention of Childhood Obesity, Second Edition

RNAO Best Practice Guideline Launch

June 26, 2014

12:00 pm to 1:00pm

Presenters

Doris Grinspun, RN, MSN, PhD, LLD(Hon), O.ONT.

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- Chief Nursing Officer, Toronto Public Health

Agenda

- Overview of RNAO BPG Program
- Guideline background
- Guideline development process
- Summary of Recommendations:
 - Practice
 - Education
 - Organization and Policy
- Guideline Implementation
- Question & Answer Period



RNAO is the professional association of Registered Nurses in Ontario, Canada



The strong, credible voice leading the nursing profession to influence and promote healthy public policy, and clinical excellence

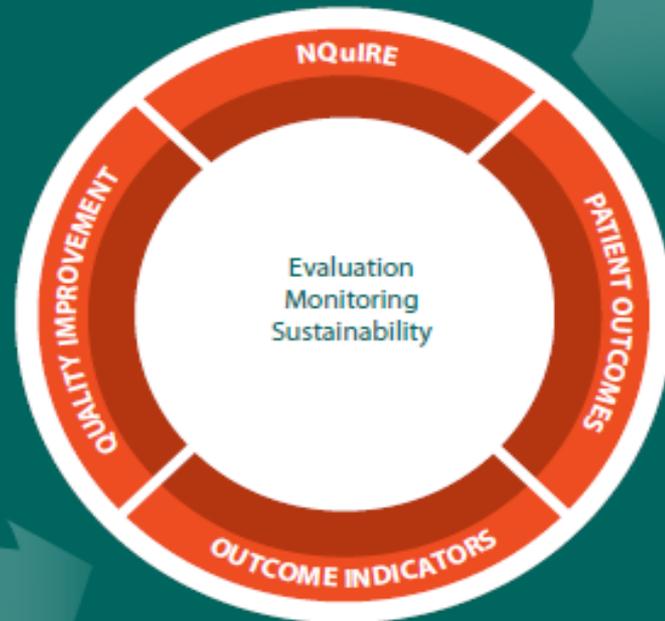


RNAO

Registered Nurses' Association of Ontario
L'Association des infirmières et infirmiers
autorisés de l'Ontario

Speaking out for nursing. Speaking out for health.

INTERNATIONAL AFFAIRS &
BEST PRACTICE GUIDELINES
PROGRAM COMPONENTS



RNAO Best Practice Guideline Program

Background

- The prevalence of obesity has doubled in the last 25 years (PHAC, 2011)
- One in three children is overweight or obese (PHAC, 2011)
- Between 1978 and 2004, the combined prevalence of overweight and obesity amongst children two to 17 years doubled from 15% to 26% (PHAC, 2011)



Purpose and Scope

- To address the primary prevention of obesity in infants, preschool and elementary-school-aged children
- To provide evidence-based nursing recommendations to all nurses and the interprofessional team, across all practice settings
- To use a population health, socio-environmental, health equity perspective to inform the recommendations

Definitions

- Primary prevention – "aims to reduce the average risk in the whole population...to eliminate or reduce the causes or determinants of departures from good health, control exposure to risk, and promote factors that are protective of health" (National Public Health Partnership, 2006, p. 4)
- Health Promotion – "the process of enabling people to increase control over, and to improve their health...also action directed toward changing social, environmental, political and economic conditions so as to alleviate their impact on public and individuals health" (PHAC, 2010)

Guideline Development Process



Research Questions

1. What are the **effective obesity-prevention nursing interventions** for children?
1. What **education do nurses need** to effectively prevent childhood obesity?
2. What **organizational or political supports** are necessary to provide a supportive practice environment for the implementation and evaluation of high-quality, evidence-based nursing care in childhood obesity?

Levels of Evidence

Ia	Evidence obtained from meta-analysis or systematic reviews of randomized controlled trials.
Ib	Evidence obtained from at least one randomized controlled trial.
IIa	Evidence obtained from at least one well-designed controlled study without randomization.
IIb	Evidence obtained from at least one other type of well-designed quasi-experimental study, without randomization.
III	Evidence obtained from well-designed, non-experimental descriptive studies, such as comparative studies, correlation studies and case studies.
IV	Evidence obtained from expert committee reports or opinions and/or clinical experiences of respected authorities.

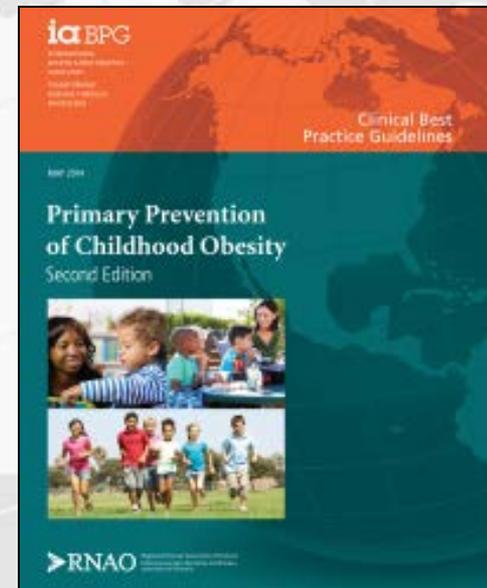
Recommendations

Practice Recommendations (14)

- Assessment (4)
- Planning (2)
- Implementation (5)
- Evaluation (3)

Education Recommendations (2)

Organization & Policy Recommendations (5)



Practice Recommendations

Assessment

- **1.1** Routinely assess children's nutrition, physical activity, sedentary behaviour, and growth according to established guidelines, beginning as early as possible in a child's lifespan. (IV) **UPDATED**
- **1.2** Assess the family environment for factors (e.g. parenting/primary caregiver influences and socio-cultural factors) that may increase children's risk of obesity. (IV) **NEW**

Practice Recommendations

Assessment

- **1.3** Collaborate with school leaders to assess elementary-school environments for risk and protective conditions that influence childhood obesity, including: student demographics, school policies, and food and physical activity environments. (IV) **NEW**
- **1.4** Assess neighbourhoods for community-level risk and protective conditions that influence childhood obesity. (IV) **NEW**

Practice Recommendations

- **2.1** Engage community stakeholders when planning primary-prevention interventions for childhood obesity. (IIb) **NEW**
- **2.2** Develop interventions that are: universally applied, as early as possible; targeted toward multiple behaviours; implemented using multiple approaches; inclusive of parents/primary caregivers and the family; and implemented simultaneously in multiple settings. (Ia-IV) **UPDATED**

Practice Recommendations

- **3.1** Support exclusive breastfeeding for the first six months of life followed by breastfeeding and complementary feeding up to two years of age or beyond. (III) **UPDATED**
- **3.2** Provide education and social support to help parents/primary caregivers to promote healthy eating and physical activity in infants and toddlers. (Ib) **UPDATED**
- **3.3** Collaborate with parents/primary caregivers, educators and support staff to promote healthy eating and physical activity in all settings where preschool children gather. (Ib) **NEW**

Practice Recommendations

Implementation

- **3.4** Collaborate with school communities to promote regular physical activity among elementary-school children. (IIb) **UPDATED**
- **3.5** Facilitate and support the integration of health and nutrition education into elementary-school programs and support the improvement of the school food environment. (IIa – III) **UPDATED**

Practice Recommendations

- **4.1** Monitor and evaluate the effectiveness of the family's approach to healthy eating and physical activity. (IV) **UPDATED**
- **4.2** Evaluate the effectiveness and sustainability of school- and community-based primary-prevention initiatives. (IV) **NEW**
- **4.3** Advocate and support the evaluation of an organization's compliance with healthy public policies, and the impact of such policies on childhood eating behaviours and physical activity. (III) **NEW**

Education Recommendations

- **5.1** Incorporate foundational primary-prevention curricula based on this Guideline into the undergraduate education of nurses and other health-care providers. (IV) **UPDATED**
- **5.2** Health-care professionals should participate in continuing education to enhance their ability to support the positive behavioural and environmental changes for children, families, and communities recommended in this Guideline. (IV) **UPDATED**

System, Organization & Policy Recommendations

- **6.1** Collaborate with organizations to develop, promote, and implement comprehensive and enforceable healthy public policies that impact healthy eating and physical activity in all childhood settings. (III) **NEW**
- **6.2** Collaborate with organizations to establish, or critically examine and work to improve, healthy public policies that address children's physical activity and built environments. (IV) **NEW**

System, Organization & Policy Recommendations

- **6.3** Collaborate with organizations to establish, or critically examine and work to improve, healthy public policies that address the school food environment and the marketing of unhealthy food and beverages to children. (IV) **NEW**
- **6.4** Collaborate with organizations and the broader community to establish, or work to improve, healthy public policies that address the barriers to health equity. (IV) **NEW**

System, Organization & Policy Recommendations

- **6.5** Advocate for the establishment of a comprehensive population-level surveillance system to monitor risk and protective conditions for childhood obesity, including:
 - prevalence of healthy weights,
 - physical activity and healthy eating,
 - socio-economic factors such as the prevalence of poverty, and
 - prevalence and duration of breastfeeding and exclusive breastfeeding. (IV) **NEW**

Guideline Implementation

- Guideline implementation is multifaceted and challenging
- Uptake of knowledge in any practice setting requires more than the awareness and distribution of guidelines
- RNAO recommends the use of the RNAO 2012 ***Toolkit: Implementation of Best Practice Guidelines (2nd Edition)***, which provides an evidence-informed process for a systematic, well-planned implementation

For More Information on Innovative Guideline Implementation Strategies

- Join us for the *Primary Prevention of Childhood Obesity, Second Edition*, Clinical Practice Guideline Implementation Webinar:

July 31, 2014 from 12:00-1:00 p.m.

- Download the RNAO's 2012 Clinical Practice Guideline Implementation *Toolkit*.

www.rnao.ca/bpg/implementation-resources

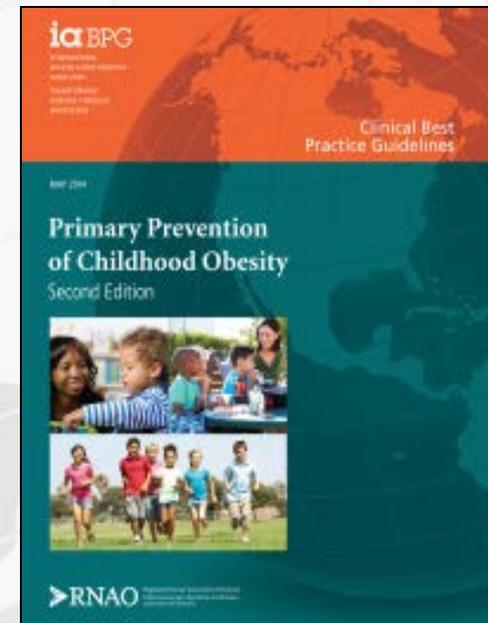
To Access the Guideline

Available for free download at:

www.rnao.ca/bpg/guidelines

Hard copy available for order by
contacting RNAO:

www.rnao.ca/contact



Any Questions?



**For more information about this guideline,
please contact:**

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**Please fill out the evaluation at the end of
this presentation (click on URL link)**

Thank you!

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