

The Hon. GREG DONNELLY: In respect of the notion of getting a school to be to provide a healthier suite of options for the children, how is that done? We have heard the pressures pushing the other way. You have given the example of Victoria. Are there specific points to where it appears to be being done and endorsed and supported and starting to make changes? Are we that far into this, or are these ad hoc examples of hearing on the grapevine more fruit?

Ms MARTIN: It is quite a tricky thing to get schools to fill in surveys and get good going into the schools. It is quite difficult.

The Hon. GREG DONNELLY: You seem to be optimistic in your comments.

Ms MARTIN: I think they are an important place.

The Hon. GREG DONNELLY: That was not my question. I think we all agree on examples of where it is starting to succeed.

Ms MARTIN: I will have to take that on notice. I will say one thing, we know that these sorts of guidelines in Western Australia has been very good. That is one place. The monitor—that sort of evidence you are talking about is really important and we do not have a

Material to support question taken on notice around the role of schools in prevention of overweight and obesity.

Langford et al 2014

- **Cochrane systematic review** conducted in 2014 looked at effectiveness of using an integrated (whole of school approach) to improving health and well-being of students, specifically the WHO Health Promoting schools framework.
The use of an integrated whole school approach found positive effects in body mass index (BMI), physical activity, physical fitness, fruit and vegetable intake, tobacco use, and being bullied. The review suggests that while intervention effects were small they have the potential for public health benefits at a population level.
- **The WHO Health Promoting School framework for improving the health and well-being of students and their academic achievement:** <http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD008958.pub2/full>

Waters et al 2011

- **Interventions for preventing obesity in children:**
<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD001871.pub3/full>



- **Cochrane systematic review** conducted in 2011 looked at intervention for preventing obesity in children. Conclusions from this study highlighted a number of factors that show contributions to the prevention of childhood obesity. All factors listed are components of a whole school approach:
- *Authors' conclusions: We found strong evidence to support beneficial effects of child obesity prevention programmes on BMI, particularly for programmes targeted to children aged six to 12 years. However, given the unexplained heterogeneity and the likelihood of small study bias, these findings must be interpreted cautiously. A broad range of programme components were used in these studies and whilst it is not possible to distinguish which of these components contributed most to the beneficial effects observed, our synthesis indicates the following to be promising policies and strategies:*
 - *school curriculum that includes healthy eating, physical activity and body image*
 - *increased sessions for physical activity and the development of fundamental movement skills throughout the school week*
 - *improvements in nutritional quality of the food supply in schools*
 - *environments and cultural practices that support children eating healthier foods and being active throughout each day*
 - *support for teachers and other staff to implement health promotion strategies and activities (e.g. professional development, capacity building activities)*
 - *parent support and home activities that encourage children to be more active, eat more nutritious foods and spend less time in screen based activities*

Hawkes et al 2015 (attached)

- Smart food policies for obesity prevention: attached. Suggests that obesity prevention must prioritise *comprehensive policy actions that create an enabling environment for infants and children to learn healthy food preferences and targeted actions that enable disadvantaged populations to overcome barriers to meeting healthy preferences. Policy assessments should be carefully designed on the basis of a theory of change, using indicators of progress along the various pathways towards the long-term goal of reducing obesity rates.*
- **Lancet** infographic: <http://www.thelancet.com/infographics/obesity-food-policy>

Victorian Government Commitment

- Based on the available evidence and support of the Health Promoting Schools framework the Victorian government have committed to supporting schools to make changes to their food environment. The Victorian Government's Achievement Program and the Healthy Food Advisory Service provides a framework, support and recognition for schools who achieve and want to achieve change.
 - The **Achievement Program** (AP) provides a framework and support for schools to address health and wellbeing through a continuous quality improvement cycle that is based on World Health Organisation's Health Promoting Schools Framework. Schools and Early Childhood services use the framework to address up to eight health areas including healthy eating and physical activity.
 - 76 schools and early childhood services have achieved best practice standards in physical activity, with an additional 82 schools and early childhood services work towards changes
 - 85 schools and early childhood services have achieved best practice standards in healthy eating and oral health, with an additional 114 working towards changes

- To meet  best practice  healthy eating and physical activity standards the school or service must have worked through an integrated whole school approach that encourages schools to determine what policies, cultural and environmental changes are needed to improve the health of their school community. Once changes have been implemented they are recognised as a health promoting school.
- **Healthy Food Advisory Service (HEAS)** provide a comprehensive and equitable, state-wide support service for schools and ECECS who are addressing healthy eating. The HEAS aims to build capacity, knowledge and skills to create healthier food environments to enable sustainable change.