

**Submission
No 38**

INQUIRY INTO CHILDHOOD OVERWEIGHT AND OBESITY

Organisation: Catholic Education Commission

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Catholic Education
Commission NSW

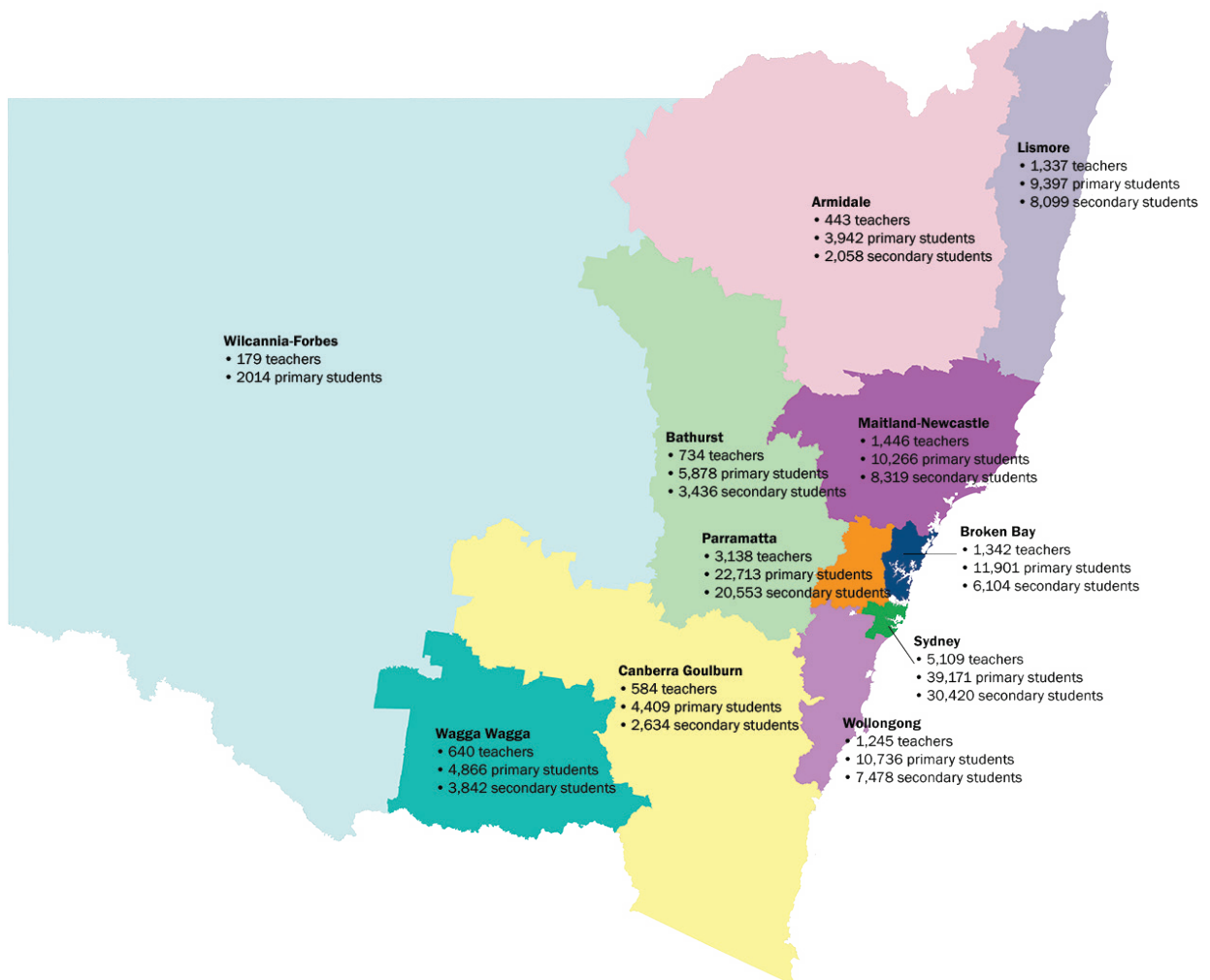
Inquiry into Childhood Overweight and Obesity

September 2016

1. Context of Catholic Schooling

- 1.1. On behalf of the Catholic bishops of NSW/ACT, Catholic Education Commission NSW (CECNSW) is the agent and advocate for 588 NSW Catholic schools which enrol 255,397 students and employ 19,580 teachers with 8,000 support staff. Catholic schools constitute a significant proportion of the schooling enterprise in NSW and are major contributors to its development. One in five NSW students attend a Catholic school.
- 1.2. Of these schools, 543 are owned and operated by Diocesan offices - either a Catholic Education Office (CEO) or Catholic Schools Office (CSO). These school authorities administer schools according to the 11 Diocesan boundaries within NSW, as shown in Figure 1. Although CECNSW acts as the Approved Authority for Government funding purposes, the CEO/CSOs act for the Diocesan-based owners of Catholic systemic schools with respect to local decision-making, thereby effectively creating 11 systems of Catholic school administration in NSW.
- 1.3. Collectively, Catholic “systemic” schools are responsible for 125,293 primary students and 92,943 secondary students. These students are educated by 16,917 teachers.

Figure 1: Diocesan boundaries of NSW Catholic systemic schools



2. 2002 Premier's Summit on Childhood Obesity

- 2.1. Catholic school policy in respect of Childhood overweight and obesity policy goals is still framed by the outcomes of the 2002 NSW Premier's Summit.

CECNSW Participation

- 2.2. At that time, the New South Wales Minister for Health called a Childhood Obesity Summit to address the emerging evidence that overweight and obesity was increasing at an alarming rate and was becoming a serious public health issue. The purpose of this summit was to further the coordination and development of strategies to promote healthy weight in NSW children and to recommend a future course of action so that the best available strategies, both long and short term, could be implemented to overcome the problem.

CECNSW was a full Summit participant.

Evidence at that time

- 2.3. In 2002, evidence was emerging to suggest the prevalence of overweight and obesity was increasing at an alarming rate in Australia. It was agreed that this was related to technological, social, economic and environmental changes that had reduced physical activity and increased food access and passive energy consumption.

Between 1985 and 1995, the level of combined overweight/obesity in Australian children had more than doubled in all but the youngest age groups of boys.

In 1995, the proportion of overweight or obese children and adolescents aged 2-17 years was 21% for boys and 23% for girls.

Key Actions since 2002

- 2.4. NSW Catholic schools have complied with the requirements of the NSW K-10 PDHPE syllabuses regarding physical activity and healthy eating. In addition, NSW Catholic schools have participated in the NSW Health SPANS (School Physical Activity and Nutrition Survey), which has provided data on the incidence of childhood overweight and obesity. Data from the 2015 survey is expected to be published soon.
- 2.5. CECNSW monitors SPANS data for the purpose of advising NSW Catholic school authorities on emerging trends relevant to school-based physical education and health initiatives. In this context, CECNSW has supported the Fresh Tastes @ School NSW Healthy School Canteen Strategy and its associated Canteen Management advice since its inception in 2004/05.

3. Current Statistics

CECNSW acknowledges the following NSW Health advice:

Childhood Overweight and Obesity

- 3.1. The most recent report available for the NSW Schools Physical Activity and Nutrition Survey conducted in 2010 suggests that the prevalence of overweight and obesity among young people aged 5 to 17 years may be stabilising but is still at concerning levels, with almost one in four (23.6%) children (24% of boys and 23.1% of girls) being overweight or obese.
- 3.2. It is agreed that childhood obesity is a serious concern because obese children have a greatly increased likelihood of becoming obese adults. Obese adults who were overweight as children also have higher levels of weight-related morbidity, and a higher risk of preventable mortality than those obese adults who only became obese in adulthood.
- 3.3. It is acknowledged that children or adolescents who are overweight or obese are more likely in the short-term to develop gastrointestinal, endocrine or certain orthopaedic problems than children of normal weight and more likely in the longer-term to develop cardiovascular disease. The most immediate consequence of overweight as perceived by the children themselves is social discrimination. This is associated with poor self-esteem and depression.
- 3.4. More details can be found online in the publication [A Snapshot of Childhood Overweight and Obesity in NSW](#).

4. Causes of Childhood Obesity

- 4.1. Overweight and obesity in children and young people is generally caused by lack of physical activity, unhealthy eating patterns, or a combination of the two, with genetics also playing an important role in determining a child's weight. In 2010, 95.9% of primary school age children and 42.1% of high school age children met Department of Health fruit consumption guidelines. However, only 43.6% of primary school age children and 20.1% of high school age children met the vegetable consumption guideline (for age).
- 4.2. CECNSW understands that in 2010 less than half of Years K, 2 and 4 students spent 60 minutes or more per day in physical activity. Boys (50.5%) were more likely to do so than girls (42.2%), but large numbers of young children failed to reach the minimum time required to have a positive health effect.

5. Incidence of Childhood Obesity

- 5.1. CECNSW engages with the childhood overweight and obesity challenge in the context of the above cited Health NSW advice. As a consequence, CECNSW is of the view that support and interventions should be targeted to that 24% of the school age population who are most at risk of adverse health outcomes.
- 5.2. Put another way, CECNSW is of the view that public policy in this area needs to acknowledge that:
- most children and young people (76%) are not overweight or obese; and
 - at risk children and young people are most likely to be found in disadvantaged low SES communities This is documented by [Obesity Australia](#)

‘Socio-economic differences in obesity

It is well known that obesity has increased greatly in Australian adults and children over the past decades. Today 3 in 5 adults and 1 in 4 children are overweight or obese. However, this differs a lot according to where people live and how well off they are. In general in Australia those who are living with greater disadvantage also have higher levels of obesity. While none of these indicators alone determines an individual’s risk of developing obesity, they are generally associated with a greater number of barriers to individuals pursuing healthy eating and activity. It is important that all efforts to prevent, manage and treat obesity are able to reach and benefit Australians across all socio-economic groups. ‘

- 5.3. In this context, the Australian Institute of Health and Welfare (AIHW) outlines the causes of overweight and obesity, listing genetic factors, SES, physical activity, consumer changes, two working parents, growth in sedentary activity (screen time), decreased food literacy and cooking skills, and greater reliance on convenience and takeaway foods.
- It also asks “Does overweight and obesity vary across population groups?” It says the biggest single factor is SES. Children living in areas with the lowest socioeconomic status (33%) were more likely to be overweight or obese compared with those living in the highest socioeconomic status areas (19%). See online [Australian Institute of Health and Welfare](#).
- 5.4. The key window for intervention to address childhood overweight and obesity is before children start school, according to the University of Sydney’s Centre of Research Excellence in Early Prevention of Obesity in Childhood. It found that some 24% of Australian children are already overweight or obese by the time they start school. It warns that waiting to intervene until children start school may be too late.

6. Our Current Initiatives

Physical Activity

- 6.1. All NSW Catholic schools implement BOSTES syllabuses as a condition of Registration and Accreditation under the NSW Education Act 1990. BOSTES requirements address healthy lifestyle issues through the Personal Development, Health and Physical Education (PDHPE) syllabuses for K-6 and 7-10. Policies administered by BOSTES under the Education Act require all registered and accredited non-government schools to provide learning experiences in PDHPE for students from Kindergarten to Year 10.
- 6.2. In the primary school years, principals are advised by BOSTES that children should accumulate 30 minutes of moderate physical activity each day for health benefits. In addition to this, children should engage in more vigorous activity for up to 20 minutes at least three days a week. BOSTES recommends that students are given every opportunity to be physically active.
- 6.3. In Years 7-10, BOSTES mandates that registered and accredited schools must teach the Year 7-10 PDHPE syllabus for 300 hours across each Year 7 to 10. This syllabus integrates physical activity with other aspects of the syllabus. Schools are required to program instruction to ensure that all strands in both Stages 4 and 5 are addressed. The syllabus rationale acknowledges concerns about “inactivity in young people” and looks to address these concerns through an integrated treatment of physical and emotional health, lifestyle choices and movement. The syllabus provides a separate strand in Stages 4 and 5 entitled “Movement Skill and Performance” and “Lifelong Physical Activity”.
- 6.4. NSW Catholic schools generally offer additional opportunities for physical activity through sport and other programs such as the Australian Sports Commission’s Sporting Schools Program for primary schools and the Duke of Edinburgh Award scheme for secondary schools. Most schools have a sports afternoon providing a variety of competitive, sports and other activities. Interschool Catholic sport activities are coordinated by NSW Catholic Schools Sports Services (see [Catholic Schools Sports Services](#)) which is a Company Limited By Guarantee. All Catholic Dioceses in NSW are members of this Company. The purpose of the Company is to provide access for all students and teachers in NSW Catholic schools to state and national school representative sporting teams.

The following pathway levels are acknowledged in this process and are available to all students and teachers:

- Intra school
- Inter School
- Regional
- Diocesan/Association
- NSWCCPS/NWCCC
- PSSA/All Schools
- School Sport Australia
- International

- 6.5. The Executive Officer of Catholic Schools Sports Services is a member of the Australian Sports Commission's Reference Group for Sport in Education. Amongst other initiatives the Australian Sports Commission offers the Sporting Schools Program for Primary schools, a program which, as noted above, CECNSW actively supports.
- 6.6. Some Catholic schools implement programs of Saturday school sport. Further to this, Catholic primary schools often provide space, equipment and supervision to enable students to engage in physical activity before during and after school. This has enabled the NSW Ministry of Health to report that 91.9% of schools encourage students to be physically active during recess and lunch.
- 6.7. Typical Catholic school authority advice on physical activity requirements in the curriculum is set out below:
- '..the expectation is that schools provide adequate levels of physical activity in the curriculum. While this advice clearly relates to K-10, it is encouraged across the Diocesan School System that, there will be active encouragement for students in Years 11 and 12 to maintain a healthy and well-balanced approach through the promotion of physical activity.*
- In determining whether adequate levels of physical activity are provided, Principals are asked to consider the time dedicated each week to:*
- *the practical component of the PDHPE syllabus;*
 - *the sport program or fitness/skills program which develops fundamental movement skills in a range of contexts (e.g. aquatics, athletics, dance, games and gymnastics);*
 - *other subjects where students are physically active (e.g. dance in Creative Arts);*
 - *extra-curricular, school-based activities in which significant numbers of students are involved (e.g. weekly training and Saturday sport).'*
- 6.8. A typical curriculum compliance checklist for K-6 is attached. A similar approach to compliance applies to 7-12.

7. Healthy Eating

- 7.1. Throughout schooling from Kindergarten to Year 10, the PDHPE syllabuses require that schools teach strands which address personal and community health. In Years 7-10, this includes strands related to:
- 'healthy food habits:*
- *defining healthy food habits*
 - *nutritional requirements*
 - *the relationship of food habits to health*
 - *cultural and social meanings of food*
 - *relationship between diet, physical activity and health'*
- 7.2. NSW Catholic schools are advised to implement the NSW Department of Education's Fresh Tastes @ School NSW Healthy School Canteen Strategy. In this context many Catholic schools have adopted the traffic light system of green, amber and red foods for both the school canteen and other activities involving food. For instance, the Broken Bay Catholic Schools Office has a Nutrition in Schools Policy, which states that: the Fresh Tastes @ School - NSW Healthy School Canteen Strategy, as outlined in the Fresh Tastes @ School Canteen Menu Planning Guide, is to be adopted and implemented by all canteens managed by or for the Diocesan schools system. This policy applies irrespective of whether the canteen is managed by the school's P&F, the school itself or an external provider.
- 7.3. CECNSW is currently represented on a cross-sectoral Working Group which is reviewing Fresh Tastes @ School. The tasks of the Working Group have included: school principal and canteen manager surveys; stakeholder consultation; research of the literature; and the development of strategies to overcome barriers to healthy canteens. The revised Guidelines are expected to be finalised by the end of 2016.
- 7.4. There has been a high level of Catholic school teacher participation in the Live Life Well @ School professional learning initiative resulting in the development of localised whole-of-school action plans designed to improve healthy eating and physical activity amongst school children. Almost all Catholic primary schools in the Diocese of Maitland-Newcastle have engaged with this initiative. NSW Catholic schools sector involvement has enabled the NSW Ministry of Health to report that 84% of primary schools across NSW participate in these programs.
- 7.5. Many NSW Catholic schools participate in Crunch & Sip (daily) and Fruit & Veg Month (last 4 weeks of Term 3). Strong participation by Catholic schools has enabled the Ministry of Health to report that 88.7% of schools have fruit, vegetable and water breaks. In addition to this, several NSW Catholic schools work with the Stephanie Alexander Kitchen Garden Foundation to encourage school-based healthy eating activities. Also, a number of NSW Catholic schools have installed plumbed (and often chilled) water dispensers to encourage the drinking of water rather than consumption of sugary drinks.
- 7.6. There has been a move away from confectionary-based fund-raising drives in schools, although these are still prevalent amongst sporting clubs and other community-based groups.

8. A Shared Responsibility

- 8.1. The Catholic community of schools accepts its responsibility in respect of the achievement of student health and wellbeing aims for NSW schooling.
- 8.2. In doing so on behalf of the 588 Catholic schools in NSW the CECNSW also strongly advises that the Childhood Overweight and Obesity challenge can only be successfully addressed through a partnership approach involving:
 - Families
 - Schools
 - Ministry of Health
 - Sport and recreation authorities
 - Food regulators
 - Media Authorities
 - Local councils

9. Next Steps

- 9.1. To progress the aim of overcoming childhood overweight and obesity amongst NSW children and young people, CECNSW advises that policies and strategies for the next decade need to:
 - a. Build on the outcomes of the 2002 NSW Premier's Summit;
 - b. Target disadvantaged communities; and
 - c. Utilise multi-agency strategies.
- 9.2. Specific policy actions could include:
 - a. Government funded support programs for disadvantaged communities including schools serving disadvantaged areas.
 - b. Facilitated local intervention planning groups involving schools, Local Health Districts and Local Government Authorities.
 - c. Incentives for local government to expand access to sport and recreation facilities including access for school-based groups
 - d. Enhanced coordination between school authorities, Local Government Authorities and the Australian Sports Commission.
 - e. Monitoring and limiting fast food advertising to children.
- 9.3. Public policy intervention is best focused at 0-5 years. According to the University of Sydney's Centre of Research Excellence in Early Prevention of Obesity in Childhood, addressing childhood overweight and obesity must occur before children start school, as some 24% of Australian children are already overweight or obese by that time. Delaying intervention until children start school may be too late, the centre warns.

Evidence of Compliance	Code	Comment (if coded B or C)
<p>5. Individual Learner Education Plans: Plans are a requirement of a range of legislative agreements and Diocesan Guidelines and recommendations</p> <p>Working copies of Education Plans for any individual learners requiring a plan</p> <p><i>NB: These learners may include but are not limited to Students with Disability, Aboriginal and Torres Strait Islander students, Gifted learners, students with a behaviour need and students with a health need</i></p>		

Code: A = All relevant evidence provided; B = Some additional evidence required; C = Evidence not available; 0 = Not applicable

Evidence of Compliance	PD/H Code	PE Code	Comment (if coded B or C)
6. Learning and Teaching Programs: RSMNS Manual 5.3.1, BOSTES Advice on Assessment			
Personal Development, Health and Physical Education: NSW Personal Development, Health and Physical Education K-6 Syllabus (1999)			
At KLA level must include:			
<ul style="list-style-type: none"> • KLA, Year, class, teacher(s) and calendar year 			
<ul style="list-style-type: none"> • KLA organisational statement 			
<ul style="list-style-type: none"> • Syllabus stage outcomes in full 			
<ul style="list-style-type: none"> • Foundation statement in full 			
<ul style="list-style-type: none"> • Units of Work consistent with the Scope and Sequence 			
<ul style="list-style-type: none"> • Student work samples consistent with learning and teaching program 			
At Unit of Work level must include:			
<ul style="list-style-type: none"> • Unit title, Year and duration 			
<ul style="list-style-type: none"> • Unit description / learning intention (2-5 sentences) 			
<ul style="list-style-type: none"> • Syllabus stage outcomes with relevant content descriptors 			
<ul style="list-style-type: none"> • Learning, teaching and assessment experiences that: <ul style="list-style-type: none"> ○ include assessment experiences that are consistent with descriptions on the Assessment Plan ○ are differentiated for individual and small groups of learners ○ provide reasonable adjustments for students with disability according to negotiated individual plans 			
<ul style="list-style-type: none"> • A list of key resources required for the unit 			
<ul style="list-style-type: none"> • A reflective evaluation commenting on: <ul style="list-style-type: none"> ○ the effectiveness of differentiating for all learners ○ the learner knowledge and skills achieved ○ the effectiveness of pedagogical practices employed 			

Code: A = All relevant evidence provided; B = Some additional evidence required; C = Evidence not available; 0 = Not applicable