

Policy Interventions to support primary schools in promoting healthy nutrition

RESEARCH RESULTS SUMMARY

STUDY AIM

Identify policy interventions that will promote healthy childhood nutrition through primary schools.

BACKGROUND

It is important that children have healthy diets. Poor nutrition can negatively impact on education, increase risk of chronic diseases, and contribute to overweight and obesity. Schools are a logical site to base interventions to promote healthy nutrition. However, little research has been conducted on the most effective policies to support primary schools in this role.

STUDY METHODS

- International literature review
- Possible interventions identified from five case study primary schools in Wellington. Data included interviews, observations and analysis of documents.
- Interviews with sixteen government officials, MPs, and members of NGOs with knowledge of nutrition policy and primary schools.

RESULTS

Children's diets are influenced by many factors across school, home and community settings. Focussing interventions to promote healthy nutrition only within primary schools will have limited impact on children's diets.

Eleven interventions were highlighted in this study. The way that interventions may interact was considered to develop a list of priorities for implementation. Four priority levels were identified based on likely impact across school, home and community settings.

The top priority focuses on interventions within schools, in line with the aim of this study. Subsequent priority areas include interventions within school, home and community settings. This recognises the diverse range of influences on what children eat at school.

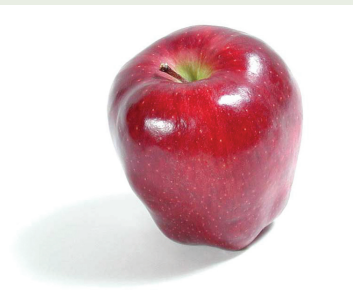
TOP PRIORITY

Encourage primary schools to develop school food policies:

School food policies should aim to reduce children's consumption of 'occasional'¹ food and increase consumption of 'everyday' food.

Schools need to be encouraged and supported to develop food policies by:

- Reinstatement of the National Administration Guideline (NAG) 5 requirement that: 'where food and beverages are sold on school premises, make only healthy options available'.
- Making nutrition focussed programmes available to all schools, particularly Fruit in Schools and also the National Heart Foundation School Food Programme.
- Make available to all schools specialist advice, such as that provided by School Health Teams of Public Health Units.



SECOND PRIORITY INTERVENTIONS

- Continue social marketing efforts established under the Healthy Eating – Healthy Action Strategic Framework and Mission-On.
- Investigate interventions to reduce the price of 'everyday' food compared to 'occasional' food, such as reduction in GST for 'everyday' food or increase for 'occasional' food.
- Investigate interventions to increase household budgets for food, such as 'smart card' voucher systems, tax transfers (like Working for Families), increase in minimum wage, increase in benefit levels, or preferably a mixture of all of these.

THIRD PRIORITY INTERVENTIONS

- Further restrict advertising of 'occasional' food to children.
- Continue to adequately fund and support nutrition education in schools.
- Provide advice and examples of fundraising activities for schools that do not involve the sale of 'occasional' food.

PRIORITY FOUR INTERVENTIONS

- Introduce front of pack 'signpost' nutrition labelling scheme.
- Investigate and trial breakfast and lunch in school schemes. These have potential to impact on nutrition, education and food security outcomes.

MUTUALLY REINFORCING INTERVENTIONS

The interventions listed above should compliment each other. A strong finding of the research is that primary schools have an important but limited influence over children's diets. Influences in the home and community are also strong. Interventions must occur in all three areas (school, home and community) to make a significant positive impact on children's diets.

While priority one interventions should be the immediate focus for implementation, the full effectiveness of school food policies will only be realised when a mixture of priority two, three and four interventions are also implemented.

BARRIERS FACED BY SCHOOLS

All schools identified staff time, a crowded curriculum, and limited resources as barriers to school food environment changes. These barriers need to be considered when planning interventions to promote healthy childhood nutrition.

FURTHER INFORMATION:

Further Information about this study and more detailed results can be found at www.wnmeds.ac.nz/academic/dph/research/heppru/research/childhood.html

Or contact investigators

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