



## The experiences of teachers regarding the prevention of overweight and obesity in primary schools

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More than a fifth of children (22.2%; n = 130,648) in England are already overweight or obese by the age of five. This prevalence increases throughout primary school age, so that by 10–11 years old (year 6) over a third (33.3%; n = 162,987) of children are overweight or obese<sup>(1)</sup>. Tackling obesity and improving child health are key components of the UK government's on-going public health strategy which states that schools 'are key settings for health promotion and prevention of ill-health'<sup>(2)</sup>. The aim of this study was to explore the lived experiences of UK teachers regarding their role in identifying and preventing overweight and obesity amongst school children. Teachers were recruited from 3 primary schools (n = 9) and invited to take part in semi-structured interviews exploring their experiences of obesity prevention in their workplace. Interviews were audio-recorded and transcribed verbatim. Raw data was analysed using Interpretative Phenomenological Analysis (as described by Smith, *et al*<sup>(3)</sup>). Super-ordinate themes 1) teacher's efficacy of obesity prevention 'and 2) 'communication with professionals and families' are described.

Teachers were able to provide examples of how they promoted healthy lifestyles, highlighting the school environment was that of a 'healthy school' (promoting fruit, healthy snacks, water and activity). They did not prioritise the topic of preventing childhood obesity, but were more concerned about having a negative impact of discussing food and diet.

*"Some of the children who I teach don't have breakfast at home before school, are on free dinners and, like what I'm trying to say is that, are more concerned about possible eating disorders and lack of eating than overweight kids"*

Overall, the teachers presented a general sense of uncertainty in their ability and knowledge of preventing childhood obesity, questioning what and how they should be teaching children and if their efforts had an impact on children's long-term health behaviour.

Talking to parents about the identification, prevention, or treatment of obesity appears to cause teachers some concern, partly through their recognition of lack of knowledge and skill in the field of obesity, and also through the acknowledgement that inadequate conversations with parents may affect their relationships:

*"I did have one parent ask me about obesity at a parents evening, mum said she was worried about it and what should she do, I wasn't prepared, I advised her to go to the GP or I could put her in touch with the school nurse, but I, when I went home I felt a bit rubbish that I had just brushed it off, and also it was embarrassing really that I couldn't help her, she must think I'm a crap teacher"*

Future activities for health promotion within a school context should include an element of teacher support and guidance, improving their knowledge and efficacy regarding the promotion of healthy eating and the prevention of childhood obesity.

1. The Health and Social Care Information Centre (2013). England.

2. DH (2011) *Healthy Lives, Healthy People: A call to action on obesity in England*.

3. Smith F, Larkin (2009) Smith JA, Flowers P., & Larkin M. (2009). Interpretative phenomenological analysis: Theory, method and research.