Preventing and managing obesity in families with young children

Barriers and opportunities in Primary Health Care
Background

• Early intervention is crucial—especially in disadvantaged families
• Role of parents in providing food environment and shaping behaviours
• Higher rates of obesity in disadvantaged families poorly understood
• Role of PHC: almost universal access but substantial barriers reported
Rethinking obesity prevention in PHC: or overcoming one barrier at a time...
Primary care providers-especially GPs and Practice Nurses don’t have time for obesity prevention
Families with young children are heavy users of PHC

- 6 visits on average to GP/PN
- 7 scheduled visits to MCHN
- For vulnerable families: up to 20 visits in first 2 years
- Parent line
- Immunisation
- Drop in visits
“We don’t have many overweight kids in our practice”
That might be true, but...

- Findings from LEAP study - poor identification of overweight (McCallum et al 2003)

- Healthy 4 Life study - prevalence within practice same as population (Denney-Wilson et al under review)
“GPs and Nurses already talk about this kind of stuff”
Obesity prevention is not part of routine care

- GPs in a Queensland study reported less than a third routinely raised excess weight and rarely used BMI-for-age charts (McMenimum 2011)
- Nutrition discussion tends to be too general and not focused on preventing unhealthy weight gain
- Lack of confidence in raising the issue of weight (Robinson et al 2013)
- Inadequate referral options (Hearn et al 2008)
- Medical and nursing curricula offer minimal study of obesity
Obesity prevention *could* be part of routine care

- PHC providers can implement obesity prevention with appropriate training, clinical infrastructure and community-based referral options (Vine 2013)
- Brief training workshop increased the capacity of PNs to provide obesity prevention intervention as part of a healthy kids check (Denney-Wilson under review)
- High level of interest in further training in obesity prevention (Robinson 2013)
“Nothing works in Primary Health Care”
Obesity management

- Sargent (2010) reviewed 17 interventions in primary care targeting overweight/obese children
  - 8 reported significant change in BMI
  - 4 reported change in dietary intake
  - 2 reported changes in physical activity
- Wake (2013) 12 month outcomes of Hopscotch shared care trial
  - Both intervention and control children lost weight
    - 26% moved from “obese” to “overweight categories”
Obesity prevention in PHC

• Intervention providing settling strategies other than feeding and delayed introduction of solids - significantly lower wt for length (Paul et al 2011)

• Melbourne InFANT trial in MCH centres with first time mothers groups: significant differences in screen time and dietary behaviours (Hesketh et al 2013)

• Healthy Beginnings trial of SNHV: significant difference in BMI, median duration of BF, later introduction of solids and tummy time (Li Ming Wen et al 2011 & 2012)
# Key opportunity for PHC in prevention

<table>
<thead>
<tr>
<th>Ask and assess</th>
<th>Advise/ Agree</th>
<th>Assist (Refer)</th>
<th>Arrange (FU)</th>
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</thead>
<tbody>
<tr>
<td>Measure Ht/Wt and plot BMI</td>
<td>Benefits of healthy weight</td>
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<td>Regular monitoring</td>
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<tr>
<td>Dietary behaviours (sugar sweetened drinks, fruit and veges, patterns)</td>
<td>Choose water, increase fruit and veges, eat breakfast, TV off</td>
<td>Whole of family approach/limit availability</td>
<td>Provide written information /websites</td>
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<tr>
<td>Physical activity</td>
<td>Active for 60 + minutes/day</td>
<td>Whole of family/explore community opportunities</td>
<td>Link into community</td>
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<tr>
<td>Sedentary behaviours</td>
<td>Limit TV time</td>
<td>Set limits on screen time</td>
<td>Provide written information /websites</td>
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PHC offers unparalleled access to families

• Important role in both prevention and management

• Further work required to better understand:
  – how to engage practitioners
  – how practitioners can engage parents
  – best strategies for different population groups
Thanks!
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