



A school community approach to influencing the determinants of childhood overweight and obesity

Lessons learnt

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Background

Shape Up – a school-community approach to influencing the determinants of a healthy and balanced growing up (www.shapeupeurope.net) was a three-year project (2006-2008) aimed at the development, implementation and assessment of an innovative approach to health promotion and health education concerning overweight and obesity in children and young people.

Core funding for Shape Up was provided by the European Commission Directorate-General for Health and Consumer Affairs¹. Participants in the project were local authorities and schools from 19 cities in 19 EU countries. The age range of children and young people participating in Shape Up was 4 -16 years.

A number of schools (at nursery, primary and secondary level) from each participating city were involved (see Table 1 below). In total, 73 schools, 2,300 pupils and 140 teachers participated actively in the project.

The project work in each city was coordinated by a local coordinator (LC) and local facilitator (LF), appointed by the local partner organisation. Additionally, a local promoting group (LPG) was established in each city to support Shape Up implementation. The LPG was coordinated by the LC.

On an international level, the project was coordinated by P.A.U. Education (Barcelona, Spain) and the Danish School of Education, Aarhus University (Copenhagen, Denmark). Additionally, three Competence Centres were responsible for different aspects of the project: ABCittà (Milan, Italy), Schulen ans Netz (Bonn, Germany), the University of Hull (Hull, United Kingdom).

The fundamental premise of Shape Up was that healthier eating and regular physical activity are keys to preventing childhood obesity and promoting the health and wellbeing of children and young people. However, healthy diet and physical activity are influenced in more efficient and sustainable ways by addressing their determinants on a school, family, community and broader societal level, rather than solely on an individual behaviour level.

¹ Additional funding was provided by the participating partner institutions as well as private organisations. For more details about the project structure, organisation and partners, see the Implementation Guidebook, available online at: <http://www.shapeupeurope.net/files/media/media32.pdf>.

Consequently, the main focus of Shape Up was on social determinants of health rather than individual health-related behaviour. The key aspects of the Shape Up methodological approach included (Simovska et al., 2006):

- Holistic and broad concept of health, encompassing lifestyle and living conditions
- Genuine participation by children and young people
- The IVAC (investigation-vision-action-change) pedagogical approach
- School-community collaboration
- Cross-cultural collaboration
- Self-evaluation and learning from experience

Table 1: Number of Shape Up schools and classes per city

City (Country)	Participating schools	Participating classes
Athens (Greece)	5	5
Ballerup (Denmark)	3	8
Barreiro (Portugal)	2	4
Bonn (Germany)	4	10
Brno (Czech Republic)	2	13
Hull (UK)	3	29
Jönköping (Sweden)	4	6
Krimulda (Latvia)	2	5
Maastricht (Netherlands)	4	4
Malta (Malta)	2	10
Mataró (Spain)	2	26
Monza (Italy)	4	4
Nicosia/Lakatamia (Cyprus)	7	7
Pécs (Hungary)	3	3
Perpignan (France)	12	16
Poznan (Poland)	2	9
Tallinn (Estonia)	3	3
Turku (Finland)	6	6
Vienna (Austria)	3	7

Purpose, objectives and methodology

The purpose of this report is to provide a summary of the relevant project documentation, with a view to systematically reviewing and discussing the lessons learnt, and to suggest recommendations concerning future practice and policy in the area of preventing childhood overweight and obesity.

The report does not aim to reiterate the concepts and the philosophy of Shape Up (Simovska et al., 2006). It assumes that readers are familiar with these. It is based on the following assumptions, which constitute its objectives:

- The Shape Up practices in the participating schools and cities generated evidence-based information; this needs to be gathered, assessed and summarised;
- The summarised information can inform decision-makers in the Shape Up participating countries locally, regionally and/or nationally, and help build effective sustainable programmes to prevent childhood obesity;
- The summarised information forms a valid basis for recommendations for future similar projects on an international (European) level.

To meet these objectives, we have analysed the following project documents, attempting to provide balanced information generated in all of the participating cities:

- The annual project reports produced by the cities following the templates provided by the Shape Up Competence Centres;
- The portal contents (www.shapeupeurope.net) and the monitoring reports on the portal contents;
- Questionnaire on Local Coordinator (LC) and Local Facilitator (LF) perspectives on and perceived outcomes of the Shape Up approach.

The questionnaire was created and administered to the LC and LF, specifically for the purpose of this report, in order to complement the information available in the project documentation and gain systematic insight into LF and LC opinions concerning Shape Up processes and outcomes.

The different data sources are combined in order to ensure the validity and reliability of the analysis. The validity and reliability of this report are determined in accordance with post positivist and constructivist epistemologies, as well as the empowerment evaluation principles (Fetterman and Wandersman, 2005).

The traditional quality criteria suggested by Lincoln and Guba (1985) which “translated” the criteria traditionally used in medical research (given in brackets) include: *credibility* or *trustworthiness* (internal validity); *transferability* (external validity); *dependability* (reliability) and *confirmability* (objectivity).

To these, and in the spirit of the Shape Up value basis, we added the criteria of *authenticity* (Guba and Lincoln, 1989), which is linked to ethics and implies balancing different perspectives, sharing knowledge democratically, learning from research and fostering social action.

The principles of empowerment evaluation have informed the overall approach to the evaluation of Shape Up, as well as this summary. Key principles we adopted relate to focusing on processes and community involvement (Fetterman and Wandersman, 2005:16).

Shape Up attempted to actively engage the members of Shape Up community in documenting the project and conducting self-evaluation activities in continuous cycles of reflection and action. This ensured a process of knowledge generation, which could effectively inform the planning, implementation and improvement of Shape Up, and can be used to inform other, similar projects.

Furthermore, this summary builds on the *valuation methodology* used, for example, within the European Network of Health Promoting Schools (Stears et al., 1999; Simovska, 2004). This methodology takes into account the theoretical and evidence bases for the project at hand, as well as the values that inform them in drawing conclusions and recommendations.

This report focuses on Shape Up outcomes, particularly those concerning the *social* (as distinct from *individual*; Navarro, 2009)² determinants of healthy eating and physical activity among children and young people (age-range: 4-16 years). The outcomes are defined as actions and changes in health-related conditions at school or community level, reached as a result of the Shape Up processes.

Taking into account the fact that the implementation of the project, including school-based preparatory work and training, lasted for two school years, while health outcomes are normally expected over a long-term period, and given that the Shape Up approach is complex, broad and multidisciplinary, this summary aims to shed light on the immediate outcomes, defined as *actions and changes in determinants on a school and local community level*.

This aim is consistent with the literature on evaluation within the discourse of health promotion at schools (e.g. Denman et al., 2002; Barnekow et al., 2006). Finally, given its open and qualitative approach, this summary also attempts to capture unintended outcomes at different levels.

² In the latest article published in *Global Health Promotion* in 2009, Navarro states that disease prevention and health promotion programmes primarily based on behavioural and lifestyle interventions are insufficient. Instead, he recommends that health strategies (globally) should be broader, including political, economic, social and cultural interventions that address the social as distinct from individual determinants of health (Navarro, 2009:15). Shape Up follows this principle on micro and meso levels.

Overview of the data records

As mentioned above, the project documentation taken into account in the summary includes:

- Annual project reports
- Portal contents (www.shapeupeurope.net)
- Questionnaire: Assessment of Shape Up by the Local Coordinators and Local Facilitators

All the documents were stored in files in the form of case records per city/country, and were labelled and categorised as data items. In the following, we describe the data sources in more detail and provide an overview of the available data per city/country. The aim of the summary is to build on balanced data from all of the participating cities.

Annual reports

Three annual reports are included in the document: initial reports (2006), interim reports (2007) and final reports (2008).³ Structure and content templates for the reports were provided by the Shape Up Competence Centres (Appendix 1 and 2).

The *initial reports* sought to outline the basic preconditions for project implementation in each of the participating cities, six months after the project launch.

The *interim reports* were submitted in 2007, the first year of project implementation at school level. Two reports were submitted during 2007, following the logic of project developments in schools: (a) September 2006-February 2007; and (b) February-June 2007. They are all taken into account in this report.

The *final reports* focused on actions and changes initiated as result of Shape Up.

Table 2 below outlines all of the reports included in this summary.

As can be seen from the table, all of the counties except Malta submitted detailed project documentation.⁴ A total of approximately 700 pages of project reports from the participating cities were taken into account in this report. These project reports were complemented with the contents of the self-evaluation portfolios where available. Much of the data in these two data sources overlap; therefore they are treated as one source.

³ The cities that joined the project in the second year (Jönköping, Sweden and Nicosia, Cyprus) did not receive funding, so were not obliged to submit reports. Therefore, the documentation about the project in these two cities is taken from the portal, and is also included in the data generated through the LC and LF questionnaire.

⁴ Malta is the only participating country that was not taken into account in the main body of this report, as the project documentation provided was scarce. However, Malta is included in the LC and LF questionnaire analysis.

Table 2: Initial status report per city, 2006

Shape Up city, country	Region	Initial report 2006	Interim report 2007	Final report 2008
Athens, Greece	Southern	-	X	X
Ballerup, Denmark	Northern	X	X	X
Barreiro, Portugal	Southern	X	X	X
Bonn, Germany	Central	X	X	X
Brno, Czech Republic	Central	X	X	X
Hull, UK	Northern	X	X	X
Krimulda, Latvia	Northern	X	X	X
Maastricht, Netherlands	Northern	X	X	X
Malta, Malta	Southern	X	-	-
Mataró, Spain	Southern	X	X	X
Monza, Italy	Southern	X	X	X
Pecs, Hungary	Central	X	X	X
Perpignan, France	Southern	X	X	X
Poznan, Poland	Central	X	X	X
Tallinn, Estonia	Northern	X	X	X
Turku, Finland	Northern	X	X	X
Vienna, Austria	Central	X	X	X

www.shapeupeurope.net: Portal contents

The contents within the IVAC Web portal section were taken into account in this analysis. A country search was also undertaken in the “News” section in order to cross-check whether relevant project activities were missing. Table 3 outlines the contents following the Shape Up general pedagogical framework (IVAC: Investigation-Vision-Action-Change) per city (country) taken into account.

This content analysis was validated against the portal monitoring document (see Appendix 3), which systematically summarised, on an ongoing basis, all of the news published on the portal by city/country, in six categories, three of which are the IVAC categories that form the focus of this analysis.

As previously mentioned, the summary presented in this report focuses on the outcomes defined as **actions and changes in determinants of healthy eating and physical activity**. Thus, the focus of the analysis is the last category of the table below (actions and changes).

However, it is important to note that the IVAC aspects are interconnected and reiterative, so relevant examples are also taken from the other categories (investigations and visions).

Questionnaire: LF and LC assessment of Shape Up

A questionnaire in order to gain an insight into the experience with, assessment and perceived outcomes of Shape Up of the local facilitators and coordinators was designed specifically for the purpose of this report. The questionnaire was administered as an on-line survey to the local coordinators and local facilitators in all of the participating cities.

Table 3: Portal contents (IVAC section)

Country, city	Region	Investigations	Visions	Actions & Changes
Athens, Greece	Southern	X	X	X
Ballerup, Denmark	Northern	X	X	X
Barreiro, Portugal	Southern	-	X	X
Bonn, Germany	Central	X	X	X
Brno, Czech Republic	Central	X	X	-
Hull, UK	Northern	X	X	X
Jönköping, Sweden	Northern	X	X	X
Krimulda, Latvia	Northern	X	-	X
Maastricht, Netherlands	Northern	X	X	X
Malta, Malta	Southern	-	-	-
Mataró, Spain	Southern	X	X	X
Monza, Italy	Southern	X	-	X
Nicosia/Lakatamia, Cyprus	Southern	-	-	-
Pecs, Hungary	Central	-	-	X
Perpignan, France	Southern	X	-	-
Poznan, Poland	Central	X	X	X
Tallinn, Estonia	Northern	X	-	X
Turku, Finland	Northern	X	-	X
Vienna, Austria	Central	-	X	X

The purpose of the questionnaire was to complement the findings from the project documentation, and to gain an insight into the local facilitators' and coordinators' assessment of Shape Up.

The questionnaire consists of 26 closed and open-type questions (Appendix 4). Table 4 provides an overview of the cities/countries that responded to the questionnaire. As shown in the table, all of the participating cities except Hull responded to the questionnaire.

Local facilitators mostly responded to the survey but, in many cases, both the local coordinator and the local facilitator responded. As shown in the table the response rate was 27, which represents 71% of the total number of local facilitators and local coordinators in all of the participating Shape Up cities (N=38). [LC=11 (57%; N=19); LF=16 (84%; N=19)].

Table 4: Questionnaire response (N=27)

Shape Up City	Region	Respondents
Athens, Greece	South	LF
Ballerup, Denmark	North	LC + LF
Barreiro, Portugal	South	LC + LF
Bonn, Germany	Central	LC
Brno, Czech Republic	Central	LC + LF
Hull, UK	North	-
Jonkoping, Sweden	North	LC + LF
Krimulda, Latvia	North	LF
Maastricht, Netherlands	North	LC + LF
Malta, Malta	South	LC
Mataró, Spain	South	LC + LF
Monza, Italy	South	LF
Nicosia/Lakatamia, Cyprus	South	LC + LF
Pecs, Hungary	Central	LF
Perpignan, France	South	LF
Poznan, Poland	Central	LC + LF
Tallinn, Estonia	North	LF
Turku, Finland	North	LF
Vienna, Austria	Central	LC + LF
Total		N=27

Findings

Project objectives

The objectives of Shape Up, as stated in the Project Description, are as follows:

- 1** Children and young people's ownership and empowerment in relation to healthy eating and physical activity;
- 2** Different dimensions of knowledge about food/nutrition (e.g. practical skills combined with knowledge about effects related to unhealthy eating; individual as well as social causes of overweight, obesity and eating problems; possible solutions and strategies for individual and social change;
- 3** Action competence, or children's and young people's ability to initiate change in their own lives as well as in the living conditions related to eating and body movement patterns;
- 4** Changes in families, where the focus is on pupils' families - how they react to the project and whether the project has an impact on consumption, eating culture and mobility schemes in the family;
- 5** Changes at the school level, focusing on what kind of changes the project brought about (e.g. changed school policy in relation to food provision, etc.);
- 6** Changes in the community/city, in terms of established physical spaces that enhance interaction in the community; activities and centres that encourage new forms of child participation and cross-cultural cooperation and contribute to developing children's ability to influence their community;
- 7** Social capital, that is, improvements in the level of children's participation, social networks, trust and sense of community.

This report focuses on objectives 5 and 6: actions and changes in health-related determinants at school and community level. Changes in family (objective number 4) and social capital (objective number 7) dimensions are commented on indirectly through the main determinants.

The development of children's and young people's ownership and empowerment, the dimensions of knowledge and action competence related to health (objectives 1, 2 and 3) as result of Shape Up are assessed indirectly, through the perspectives and assessment of the local facilitators and coordinators documented through the questionnaire.

The changes in determinants of healthy eating and physical activity form the main focus of this report because the primary aim of the document is to provide evidence and recommendations concerning the health outcomes of the project. The educational outcomes are addressed through the perspectives of the LF and LC expressed in the questionnaire.

Despite the fact that they are invaluable, the educational outcomes do not form the main focus of this report; they are explored through in-depth case study research and related cross-case analysis (Simovska, 2009, *Shape Up Research Report*; Simovska *et al.*, forthcoming).

Support structures as part of the project development

Support structures play an important role in project implementation and thus in ensuring outcomes in terms of changes in health determinants. This is especially the case for complex, international, multidimensional projects such as Shape Up. Therefore, we began by assessing the effectiveness of Shape Up in terms of providing the necessary preconditions for project development and implementation in the wide-ranging contexts of the participating cities.

The project documentation, particularly the initial project reports (2006), provides insight into the main features of the diverse structures in which Shape Up was implemented, and also into related facilitating and restrictive factors for project development.

In the following sections, we account for the effectiveness of Shape Up in providing a global framework for health-promoting interventions which is solid enough to ensure conditions conducive to project implementation and sustainability and, at the same time, flexible enough to allow for cultural and contextual variations.

More precisely, we look into the establishment and operation of the Local Promoting Groups (LPG) and the processes of teacher training and professional development as crucial preconditions for the effectiveness of Shape Up.

Local Promoting Group

The initial project reports provide insight into the processes related to the establishment of support structures for project implementation (Local Promoting Groups [LPG], school-community links, and the professional development of teachers/Shape Up staff).

These processes are considered to be key preconditions for the successful implementation of Shape Up on a city level and therefore constitute a point of departure in terms of assessing the outcomes of Shape Up.

The project reports demonstrate similarities, but also differences among the involved cities related to the initiation of Shape Up. All of the participating cities had established a Local Promoting Group (LPG) to support project development at the city level. However, the composition of the LPG differed depending on local needs and priorities.

In some cases, the role of the LPG was to provide political support for the project, thus members of the LPG were city council employees or employees of national health and/or education ministries. Sometimes, as the quote below illustrates, even a mayor of a city took part in the LPG.

We chose LPG members from a broad range of activities, because they can help us in many fields. We have worked with many of them before, so we know what can we expect from them [...] The mayor is a very useful member of the LPG, as he knows the local community and knows what it is possible to implement. (Initial Report, 2006, Brno, p. 1).

The initial reports also demonstrate that successful links were established between national and regional (local) levels. The following two quotations from two different project reports illustrate this point:

The best thing about Perpignan is the exceptional collaboration between the educational services of the city and the national education authority which allows us to adopt a coherent attitude with respect to the Shape Up teachers and families (Initial report, 2006, Perpignan, p. 1).

We have successfully built close links between schools, local authorities and the wider community. This increases the possibility of achieving real, effective and durable changes (Initial report, 2006, Monza, p. 1).

In other cases, nutritionists and other health experts were invited to join the LPG to ensure a focus on overweight and obesity, whilst maintaining the strong participatory element and close collaboration with schools.

The Shape Up team in Vienna is glad to have found the team of two nutritionists, who are experts in the field of school instruction about healthy nutrition [...] The facilitators are proud that they were able to set up an LPG with many interested people, representing many helpful institutions, such as the Sports University and the City Council (Initial report, 2006, Vienna, p. 1).

We have formed a local Shape Up team (LPG) that consist of four teachers, two medical professionals, a peer education manager, the local coordinator and the local facilitator (Initial report, 2006, Krimulda, p. 1).

It seems that the Shape Up global framework was successful in allowing for the local Shape Up teams to decide on the best possible support structures for Shape Up, which ensured links between the health and education sectors on regional, national and local levels, and political and professional support for the implementation of the project.

Regardless of the differences, it is evident from the project reports that the common denominator in all of the cities was ensuring links between the health and education sectors and establishing effective partnerships between schools and different departments within local authorities.

Furthermore, the priority in all of the participating cities seems to have been to ensure the sustainability of the project. This is a very significant point, not least because the health outcomes on an individual level, in terms of lifestyle change or physical health status (e.g. reduction in BMI, etc.), are long-term goals of any preventive intervention (concerning obesity or other health issues), including Shape Up.

Therefore, providing evidence for an effective implementation framework and supportive sustainable structures is of crucial importance for evaluating a project and summarising the lessons learnt.

In addition, the initial project reports show that the local coordination and facilitation of the project and the composition of the LPG seem to have provided for a good balance between the health and education sectors at the city level, as well as for establishing links with other related sectors in the city council (e.g. city planning, transport, the environment, etc.).

Teacher training and professional development

Another important precondition for the project implementation and outcomes is the professional development of teachers and other Shape Up staff on a local level.⁵ The project documentation shows that teacher training activities were organised in most of the participating cities.

⁵ Shape Up training was organised on a global level: the Competence Centres led by ABCitta provided capacity development and consultation for the local facilitators and local coordinators. They were responsible for transferring this training further on a local and school level.

The Shape Up Methodological Guidebook (Simovska et al., 2006), which was provided online and in hard copy in 19 languages, was widely used for this purpose. A survey to evaluate the use of the methodological guidebook was administered by the University of Hull in 2007. It demonstrated that the guidebook was deemed useful and had been used for local teacher training.

Nine out of thirteen (69%) local facilitators who responded to the survey had used the guidebook as a teacher training resource, and the remainder had distributed the book among the participating teachers.

Further, as shown in the example of the question from the same survey, presented in Table 5 below, the facilitators found the methodological guidebook useful for multiple reasons: as their own capacity-building resource, as a training resource, and as a project dissemination resource.

Table 5: Excerpt from the survey on the use of the Shape Up Methodological Guidebook

In what ways have you found the guidebook useful?	%
For improving our own knowledge	53
For informing others about Shape Up	76
For education purposes (e.g. training workshops)	61

The training activities were organised in a variety of ways depending on the needs in each specific context. The project documentation shows that, in some cities (Maastricht, Brno, Pecs, Vienna), the training was organised on an *informal* basis, in the form of *sharing concepts and methods* with teachers, while in other cities, the training was more formal, for instance, taking the form of *training sessions* (Barreiro, Perpignan, Vienna, Tallinn, Monza, Mataró, Perpignan, Bonn, Poznan), *teacher conferences* (Krimulda) or seminars (Ballerup).

In one of the participating cities (Turku), special Shape Up teacher training was not organised, as the local coordinator's and facilitator's assessment was that the participating teachers were already familiar with the participatory and action-oriented health promotion approach through their participation in other, similar projects.

In some of the cities, the local facilitator worked directly with the pupils at school and coordinated the school-based project activities (Maastricht, Hull, and Ballerup), which was perceived as an advantage (e.g. Maastricht and Ballerup), but sometimes as a barrier to project development (Hull).

Barriers and opportunities

Barriers and opportunities concerning the supporting preconditions for effective project implementation identified on the basis of the project documentation include:

- 1 Tensions between the priorities of the school leadership on the one hand and teachers on the other, and lack of motivation on behalf of the teachers to add to their already heavy workload without additional resources. In some contexts, problems with teacher engagement were related to the local political situation.

NB: The percentages in all the tables have been rounded up to whole numbers.

Most of the reports point out the need to incorporate Shape Up into the regular school curriculum from the very beginning. The extracts below taken from the reports from two cities illustrate these points:

[One of the difficulties] is the difference between the goals of the management and the teachers within the school (Initial project report, Maastricht, 2006, p. 2).

We have had difficulties engaging more than 2-3 teachers from each school involved in Shape Up, due to problems with the local teachers' union (Initial project report, Ballerup, 2006, p. 2).

Difficulties convincing teachers that Shape Up does not necessarily entail extra work. Many activities can be incorporated into the existing curriculum (Initial project report, Hull, 2006, p. 2).

[It is difficult] to match the project timing with the school timing (Initial project report, Mataró, 2006, p. 2).

- 2** Defining the role of the local facilitator. In some of the cities, the local facilitator was expected to coordinate the school-based project activities and work directly with the pupils, which was often perceived as an additional burden for the local facilitator. The extract from the report below highlights this point:

There seems to be some confusion about this role, and some teachers seem reluctant (perhaps lacking in confidence?) to facilitate Shape Up activities without the project facilitator being present (Initial project report, Hull, 2006, p. 2).

- 3** Ensuring synergies with the existing similar projects at school and/or community level. In each of the cities, there were similar (at times perhaps competing) projects going on at the time of the Shape Up initiation.

Sometimes, this was perceived as an advantage and synergies were drawn between the projects to maximise their effects, as the extracts from the reports below demonstrate:

Good groundwork has been made. Working methods and ways of action are already familiar to schools. We have not started from zero; we have been able to connect it well with existing projects, for example 'Schools on the move' (Initial project report, Turku, 2006, p. 1).

The city leaders have a strong commitment to the Healthy City Project, so they were open to the Shape Up project as well. The strong basis established by Healthy Cities made it easier to put other initiatives connected to health on the city level (Initial project report, Pecs, 2006, p. 1).

Even though the synergies with the other projects were mostly perceived as beneficial to Shape Up implementation, the project documentation also shows that, at times, there was a danger of “parallelism” (Sørensen, 1997) whereby traditional practices are not being truly challenged but new initiatives are solely integrated into existing ones. The extract from a report below is representative of this issue:

The teachers feel that they already work with participation. Even when they do not put it into practice, it is very difficult to convince them otherwise (Initial project report, Maastricht, 2006, p. 2).

To sum up, the project documentation demonstrates that Shape Up has been successful to a large degree in providing the necessary preconditions for project implementation in diverse European contexts and conditions.

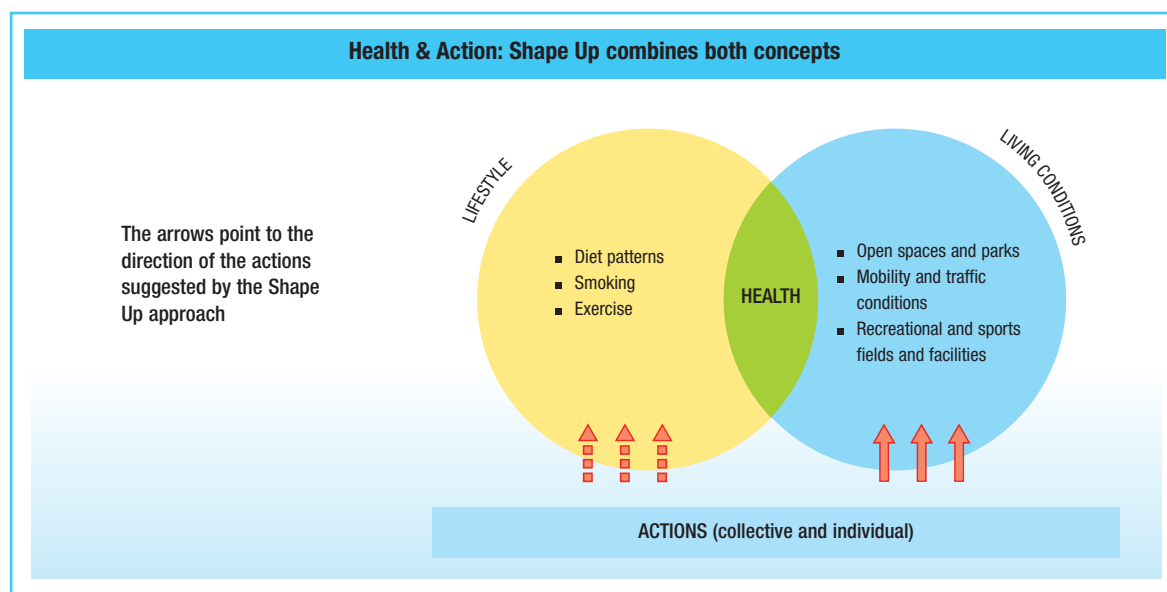
The framework was clearly defined and supported with printed and online materials to ensure a common approach, and was sufficiently flexible to allow for contextual adjustments and the incorporation of local needs and priorities.

The establishment of the LGP in each of the participating cities, the coordination of the LPG by the LC, the division of work between the LC and LF, the locally tailored training sessions of the Shape Up staff and the established links among schools and different sectors within local authorities are all documented indicators of the successful framework for project implementation.

Health determinants

As mentioned earlier, Shape Up focused on social rather than individual determinants of healthy eating and physical activity (i.e. related conditions on a school and local community level), as illustrated in the figure below.⁶

Figure 1: *Shape Up action focus* (Simovska et al., 2006)



The project documentation shows that, in each of the participating cities, a variety of locally relevant determinants linked to childhood overweight and obesity were identified and addressed. Children and young people were actively involved in identifying these determinants and were supported by the adults (teachers and local Shape Up staff) to bring about health-promoting changes.

In accordance with this, and consistent with the IVAC pedagogical model, the first phase of Shape Up implementation in schools⁷ was devoted to ensuring that pupils are adequately guided to *investigate* health-related conditions at different levels (classroom, school, family, neighbourhood, local community and/or city), and to relate these conditions with possible health outcomes (e.g. overweight, obesity, wellbeing, positive health, etc).

⁶ The living conditions in the figure represent health determinants.

⁷ These two Shape Up phases concern the project work with pupils in schools; thus, they are consistent with the duration of the school year.

The pupils did this assisted by their teachers, the Shape Up staff and a number of health as well as other experts working with Shape Up. Also, in the first phase of the project work, pupils were guided to develop their visions and imaginative ideas about possible solutions to the problems they identified, and to plan actions bringing about specific positive changes.

The second phase of the project was focused on taking concrete actions and initiating health-promoting changes at the different levels mentioned earlier. It is this phase that is focused on in this report. Specifically, we are looking at the following questions:

- How were determinants identified and implemented in different contexts?
- Which determinants formed the focus of the project work?
- Which actions were taken?
- Which health-promoting changes were achieved?

The questionnaire data (Table 6) present an outline of the issues that Shape Up addressed, as reported by the local coordinators and local facilitators. The topics marked in bold below are related to the two main themes of Shape Up: healthy eating and physical activity.

This demonstrates that, even though Shape Up worked with a broad and holistic notion of health and health promotion in the different cities, the issues specifically related to healthy eating and physical activity were perceived by the majority of LCs and LFs as the focus of Shape Up.

Table 6: Which of the following themes and topics have formed part of the Shape Up activity/activities in your city/school(s)/class (N=27)

Theme/topic		%	
Body movement and physical exercise	96%	Sexual behaviour	11%
Extreme sports and athletics	19%	Traffic and traffic safety	15%
Body knowledge/awareness	48%	Bullying	19%
Healthy/unhealthy food and drinks	96%	Family, friends, friendship, teenage life	48%
Nutrition (vitamins, food pyramids, etc.)	82%	Leisure time and activities	56%
Obesity and body weight	44%	School community – community around the school	78%
Food items, products and recipes	52%	Other social themes	14%
Food aesthetics	44%	Psychological themes and feelings	13 %
Sleep and sleeping habits	30%	Cognitive skills and abilities	5%
Sickness and disease	15%	Nature and environment (school garden, forest, wildlife, etc.)	20%
Hygiene and body care	37%	Shape Up project, Shape Up portal and other activities	14%
Oral and dental hygiene	15%	Politics, health regulations, etc.	8%
Medicine and use of medicine	7%	Other	0%
Alcohol, cigarettes and smoking	33%		
Other drugs and drug addiction	7%		

Table 7 below summarises the health-related determinants and related health promoting changes that were identified and influenced by children and adults together over the course of Shape Up. This is the crucial summary of the actions taken and changes brought about over the course of the project.

Data are taken from the annual project reports (2007 and 2008) from each city. As mentioned earlier, these data were combined with the Web content published on the Shape Up portal (section IVAC) and, in some cases, the self-evaluation portfolios⁸.

It is worth mentioning that the table below does not represent exhaustive documentation of all the determinants and actions/changes initiated over the course of Shape Up. The summary takes into account only those actions directly addressing healthy eating and physical activity determinants.

In this respect, it is fair to note that a number of other types of actions were also taken over the course of the project which dealt with health determinants and health promotion in a broader perspective (e.g. cognitive skills, specific health topics, improving social relationships among the pupils and between teachers and pupils, improving intercultural understanding in some multiethnic Shape Up schools, cross-cultural [European] exchange, insight into a variety of cultural perspectives related to eating and body movement, etc.).

Although valuable and highly relevant for the wider educational outcomes of Shape Up, these actions are beyond the scope of this report.

It is also worth mentioning that the data used in this report have been collated per city, while the project reports provide detailed information on each participating school/class. Detailed analysis for each individual Shape Up school in each city is beyond the scope of this report.

The criteria for the Shape Up activities to be included in the summary presented in Table 7 are as follows:

- The activities are directly related to determinants of healthy eating and physical activity at school, local community or family level;
- The activities are aimed at initiating relatively sustainable positive changes in determinants of healthy eating and physical activity at different levels;
- Pupils are actively involved and guided by the Shape Up staff to have a say in the decisions concerning actions and changes, as well as undertake the specific actions.


⁸ The project documentation in the form of self-evaluation portfolios is rich with photographs, charts, self-evaluated activities and other evidence, so it proved to be a very useful data source when available.

HEALTH-RELATED DETERMINANTS AND HEALTH-PROMOTING CHANGES FOCUSED ON BY SHAPE UP	
Athens, Greece	
New content in health education lessons	Mediterranean diet, healthy breakfast, oral hygiene, the difference between being “corpulent” and “overweight”, eating disorders and dietary deficiency.
School policy	establishing participation mementos at school level (active participation award scheme for all pupils).
Learning through experience	a book of recipes created by pupils, including the use of olive oil in one's diet.
Ballerup, Denmark	
Food offer at school	establishment of a school canteen, establishing fruit and food stalls in several places around the school, five different meals on the menu, pupils (3rd grade) serving fresh fruit to all classes, teachers and school management for a week, 3rd-grade pupils cooking a hot meal with their teachers at school once a week.
New opportunities for physical activity at school	“body experimentarium”, traditional games and plays, songs and singing, older pupils teaching younger pupils.
New opportunities for physical activity in the local community	pupils participating in the board for a new sports hall combined with a cultural centre in the municipality.
Barreiro, Portugal	
Food offer at school	pupils introduce a complaints book for the whole school in the school canteen and cafeteria, along with a suggestions box to improve the quality of the food offered in the canteen; a nutritionist was invited to the school to help pupils analyse the quality of the menu in the school canteen (at the pupils' request).
New opportunities for physical activity at school	request submitted by the pupils to the city council for a larger school playground, introduction of skipping as a new activity that does not require expensive equipment, advertising the new activity with posters throughout the school, emphasising the health benefits of the activity, a school skipping competition, dissemination of the activity among nursery schoolchildren.
New content in health education lessons	health professionals invited to the school to follow up on the pupils' suggestions to learn more about eating disorders, doubts and insecurities related to eating, etc.
Learning through action to improve the physical environment of the school	decorating the hallways in the school with special paintings of healthy food, exhibition on eating disorders, collection of postcards with representations of healthy food, exhibition of jewellery and fridge magnets created by the pupils on the topic of healthy food and eating, etc., book on healthy eating habits created by the pupils entitled Feed yourself, grow up healthy and printed and distributed among all of the pupils at the school, as well as teachers, all of the schools in the city, public libraries, parent organisations, education and health ministries, hospitals specialising in child obesity, etc.


Table 7: Children and adults working together to influence the determinants of healthy eating and physical activity




Cooperation with parents and extended families	meetings with a nutritionist to advise parents on healthy eating for children, March for Health – children marching together with parents and grandparents to hand out leaflets on healthy living to passers-by, intergenerational game playing in the park.
Cooperation with the local community	visits to the training facilities of Sporting Clube de Portugal to watch football players in training and exchange insights and experience with real-life sportsmen.
Bonn, Germany	
Food offer at school	pupils, guided by a teacher, organise food tasting every week, discuss the quality and taste of the food offered and suggest changes to the menu.
Learning through experience	pupils produce a healthy jelly baby (a popular sweet) by using healthy ingredients, critical analysis of food advertisements in the media, creating a Shape Up film by using similar advertising tricks, creating a quiz about health, courses in healthy cooking, and preparing fruit and vegetable cocktails.
New opportunities for physical activity at school	rehabilitation of the schoolyard through the construction of a nine-metre Viking ship, in cooperation with parents, architects and the municipality, healthy games organised by pupils.
New opportunities for physical activity in the local community	establishing a youth fitness club at the school, making sports facilities in the community accessible to all pupils from the school, for PE classes and free periods, organising a sponsored run together with the city council.
Brno, Czech Republic	
Food offer at school	new, healthy school canteen.
New possibilities for physical activity at school	training in the use of special equipment, sports tournaments, climbing wall and training in the school hallway, classroom movement (yoga, obstacle track, limbering up, etc.).
Changes in the physical environment of the school	building a climbing wall in the hallway.
Hull, UK	
New possibilities for physical activity at school	establishing a “peace garden” at the school to be used in the breaks for relaxation, girls-only football sessions.
Cooperation with parents	to increase awareness of the “five-a-day” fruit and vegetable guidelines, resulting in healthier packed lunches brought by pupils to school, family days to build on pupils’ Shape Up ideas and activities (dancing gym, healthy sandwich-making, smoothie-making etc.).
Specific forms of pupil influence	“Consultation dinner”: pupils and local chef preparing food, parents and pupils consulting on local issues (e.g. regeneration of the area around one of the Shape Up schools), pupils participating in an event (an area partnership conference) at community level to promote Shape Up and gain additional support and contacts.




Cooperation with the community	the work of local agencies to improve local health, improvement of the local environment (playgrounds, green areas, etc.), pupils holding a question and answer session with policy-makers to challenge local policy-makers to work towards improving health in the local community, opening up the school recording (TV) facilities for the community with a view to promoting SU activities.
Learning through experience	smoothie-making sessions and cookery club sessions making food, plans to carry out Shape Up radio broadcast over a one-week period (during SU week).
Krimulda, Latvia	
Learning through experience	physical activities with families and others in the open-air (to hear, to listen and to understand nature and human beings interacting with it), demonstrations of different methods of active lifestyles, learning how to make healthy food and correct and appropriate eating manners.
Cooperation with the local community	exchange with other participants and development of discussions within the community.
School policy	the weight of the school bag revisited.
Maastricht, Netherlands	
Cooperation with the local community	safety of the traffic around the school, a playground for the disadvantaged.
Food offer at school	healthy canteen at the school.
School policy	new policy banning sweets.
School democracy and pupils' influence	the pupil council runs Shape Up at the school.
Mataró, Spain	
New opportunities for physical activity at school, beyond PE classes	introducing a korfbal game twice a week at break time, "tambori" training and competition, carnival devoted to dancing and body expression for pupils of all ages, fitness sessions and swimming classes.
New contents in the PE classes in partnership with the city council	using the multipurpose sports pavilion opposite the school for PE classes, as well as the municipal swimming pool.
Cooperation with the local community	request to the municipality for new equipment for the school playground to encourage more active play during breaks; creating itineraries to walk around Mataró ("Creating health on foot"), conceptual walking tours (e.g. a route taking in waterfalls in the surrounding woods).





New opportunities for healthy eating at school	fruit on offer at breakfast time for all pupils at school, carnival week devoted to food and taste, change in the content of the vending machine at school.
Cooperation with parents	to reinforce a healthier lifestyle among pupils: workshops on healthy food for parents, in cooperation with local chefs.
School physical environment	school displays focusing on healthy eating (giant food pyramid, healthy menus, families preparing food and eating together, etc.).
Breakfast club at school	pupils bring breakfast from home but eat together and discuss healthy eating.
Changed award scheme at the school	(e.g. winners of a competition get fruit or free tickets to the ice rink as a prize).
Monza, Italy	
New opportunities for physical activity at school	suggestions and pupil training by external experts, incorporation in annual school plans, new sports training (swimming and mini-volleyball classes during school hours), orienteering training.
Action-based learning about healthy eating and wellbeing	pupils and teachers together create a Shape Up log book on wellbeing, documenting links between healthy and balanced eating/drinking and emotional wellbeing, establishing a vegetable garden at school.
Establishing cooperation with parents	nutritionist gives advice to parents.
Establishing cooperation with the local community	a sustainable mobility initiative, walking to school initiative, etc.
School physical environment	establishing a bicycle workshop at school to encourage cycling to school.
Disseminating good experiences	pupils' column about Shape Up in the school newsletter.
Pecs, Hungary	
New opportunities for play and physical activity at school	during the school year, over and above PE classes: school-based sports championships, including a badminton championship for teachers, floor-ball training and championship, introduction to new sports (karate, judo, tennis, aerobics).
New opportunities for physical activity in the community	training in ice skating for pupils and teachers.



New contents in PE classes	university students teach primary school pupils to prevent back injuries, training in balance, etc. through the use of special equipment, focus on pupils with mobility difficulties.
Learning through experience	pupils created a health-related board game, peer cooperation.
School policy and cooperation with parents	establishing a “Fruit Day” with the participation of parents.
Perpignan, France	
New forms of learning about food and eating through action and experience	establishment of organic kitchen gardens, establishment of compost boxes at school, cooperation between schools and local farmers, food, eating and body movement incorporated in different subjects in new ways.
New partnerships between schools and food industry	between schools and parents, facilitating mutual aid among parents in terms of healthy eating and physical activity.
New opportunities for physical activity in the local community	partnerships with the city council to improve the safety, accessibility and mobility possibilities in the community.
New forms of physical activity at school	African dance lessons at school.
School policy	establishment of snack time at school, together with parents.
Poznan, Poland	
Food offer at school	fizzy drinks excluded from the school canteen and school shop.
School policy	a new policy on fruit and vegetables instead of sweets in packed lunches brought from home, “no snacks day” policy, dance/music/movement, active use of break times, milk on offer at school.
School environment	conducive to cycling: bicycle park established, a “two-wheel league” movement to encourage cycling to school, a new school playground (in cooperation with the local community).
Learning through experience	workshops on eating disorders and healthy eating by guest experts from the University of Medical Science, painting competitions on how to live healthily.
New opportunities for physical activity at school	new sports competitions (e.g. water polo, wrestling, dance shows, etc.).
Tallinn, Estonia	
Food offer at school	change in the menu at the school canteen.
School policy	Shape Up week incorporated in the regular school year.

Cooperation with parents	annual survey with parents about the quality of regular physical activity provided by the school for children, joint outings with teachers, parents and pupils.
Cooperation with the community	regional quiz organised by the school on healthy lifestyles, older pupils preparing training materials and helping the younger pupils to participate.
Peer education	older pupils organising a healthy salad competition and costumed sports games for younger pupils to explore new forms of physical activity.
Turku, Finland	
Food offer at school	pupils make suggestions for good meals and prepare selected meals with the school caterers for the whole school.
Democracy and health	school parliament consisting of pupils as “ministers for health”.
Learning through experience	“Health Dice Game” designed by pupils (pupils invited politicians and city officials to play the game), school playground projects, pupil activators (for active use of the school breaks), pupils illustrating on calendars “what can you do this month that is healthy?”, greetings cards for friends, inviting them to be physically active.
Cooperation with parents	‘Healthy disco’ organised by the pupils at the school, inviting parents to attend.
New content in PE classes	pupils guided by teachers through the IVAC process to contribute to and organise the school PE and health education lessons taken by each class during the school year.
Vienna, Austria	
Food offer at school	pupil petition asking for more fruit and vegetables and the removal of the unhealthy hot dogs canteen. The pupils managed to influence what was sold in the cafeteria: the fat-filled hot-dog were removed, fresh fruit was sold, and the soft drink vending machines included milk and water.
New forms of pupil influence	pupils invited members of parliament, LPG members, media experts and health and education experts to communicate their visions about a better (healthier) school environment.
New forms of physical activity at school	“rocket-ball” activity.
Learning through experience	production of videos on different health-related topics selected by the pupils.
Establishing cooperation between primary and secondary Shape Up schools	to ensure project sustainability.

It is evident from the documented outcomes presented above that the Shape Up approach, consisting of genuine pupil participation, the IVAC pedagogical strategy, and school-community collaboration, proved to be effective in involving and enabling pupils to work together with competent adults on real-life problems related to healthy eating and physical activity.

Furthermore, the Shape Up approach proved successful in bringing schools and local authorities together with a view to establishing new partnerships and influencing a number of obesogenic environmental factors at school, local community and/or family level.

Even though, as shown in Table 7, the determinants were put into operation and addressed in a number of different ways in each particular context, several shared categories of actions/changes emerge from the data, as summarised in Table 8 below.

The initiated changes are of a different nature, scale and scope (e.g. modified menu at the school canteen, reduced traffic speed around the school, new playground with special play equipment, new school health policy, increased awareness among pupils or parents on a particular health issue, etc.).

However, they all represent relatively stable changes in the (micro and meso) structural conditions related to healthy eating and physical activity.

In the following, we briefly comment on the two main categories (determinants of healthy eating and determinants of physical activity) outlined in Table 8, discussing selected representative examples from different cities.

Determinants of healthy eating at school, local and family level

As children and young people spend long hours at school, easy access to good quality, healthy, tasty and varied food at school and in the neighbouring community during school hours is one of the crucial determinants of healthy eating. Additionally, the awareness and engagement of parents and cooperation between the school and parents in this respect are very important.

Last but not least, giving pupils the opportunity to have a say about the determinants (for instance, about the menu in the school canteen, the physical environment of the canteen, its atmosphere) or their direct experience with exploring and preparing healthy food and discussing its nutritional and cultural aspects, has an essential impact on their interests, ability and motivation to learn about health and nutrition, as well as to act and adopt healthier eating patterns.

As shown in Table 7 above, nine out of sixteen Shape Up cities addressed the quality of the food offer at school directly and the rest tackled this determinant through other actions such as the establishment of new partnerships with the local community and parents, new school policies, new teaching/learning strategies (cookery schools, food tasting workshops), etc.

In accordance with the Shape Up approach, the cities tackled the determinants in a variety of ways, through working with pupils' ideas and joint planning between the Shape Up local staff, schools (teachers, pupils and school management) and local partners.

CHANGES IN DETERMINANTS INFLUENCED BY SHAPE UP ACTIVITIES.

Healthy eating

School: Increased nutritional quality and variety of the food available in the school canteen
Improvement of existing and establishment of new school facilities related to healthy eating
New school policies concerning healthy eating

Community: Increased possibilities for healthy eating provided by the environment surrounding the school (nearby cafés and shops)
New partnerships with local municipalities and city authorities focused on creating better access to healthy food around the school

Family: Increased parental awareness about the links between healthy eating, learning and prevention
Improved cooperation with parents focusing on the family patterns in terms of lunch boxes/sweets/drinks brought to school by pupils

Physical activity

School: Increased number, attractiveness and variety of possibilities for physical activity provided by the school physical environment
Improved opportunities, information and skills provided during school health education classes
Improved opportunities, information and skills provided during PE classes
New school policies concerning physical activity
Increased variety of teaching/learning styles including experimental learning, learning by doing and participatory and action-oriented learning

Community: Increased number, attractiveness and variety of possibilities for physical activity provided by the environment surrounding the school
New partnerships with local municipalities and different departments of the city council focusing on creating more possibilities for active mobility

Family: Increased parental awareness of mobility patterns and health
Changed family patterns in terms of mobility/bringing children to school, e.g. walking as opposed to driving children to school, etc.

Table 8: Summary of the changes in determinants of overweight and obesity influenced by Shape Up activities

For example, in Ballerup, Shape Up placed renewed focus on the establishment of a school canteen in cooperation with the city council. Even though the canteen was not established by the end of the project, the school made plans to continue the action the following year.

In the meantime, as part of Shape Up, pupils established food stalls selling healthy food. Furthermore, they simulated a school canteen by preparing and serving food together with teachers for the whole school once a week, and served fresh fruit to all the classes.

All these actions were a valuable learning experience for the pupils and convincing arguments for the municipality to support the canteen initiative. Similar actions to establish a school canteen were also undertaken in Brno and Maastricht.

In Bonn, where the Shape Up school already had a canteen, the same determinant was approached in a different way: pupils, guided by teachers, organised food tasting every week, discussed the quality and taste of the food offered in the canteen and, on the basis of this, suggested changes to the menu.

Similar actions and changes concerning the school canteen were initiated in Barreiro, Tallinn and Turku. In Vienna, in addition to changing the canteen menu, the pupils, supported by the local Shape Up staff, succeeded in removing the canteen hot-dog offer for commercial reasons.

Furthermore, in Barreiro, a complaints book was set up at the school canteen, so that pupils' opinions about the quality of the food offered could be heard on a regular basis.

In a similar vein, consistent with local needs and priorities, Shape Up in Mataró succeeded in replacing the content of the school vending machine with healthier choices. The same action was undertaken in Vienna.

Also in Mataró, as a part of the school policy, a breakfast club was established so that pupils could eat together (the food that they brought from home) while discussing healthy eating. Part of the school policy involved offering free fruit to the pupils at breakfast.

Examples of new partnerships with the local **community** include: Shape Up in Perpignan succeeded in establishing cooperation between the school and local farmers, and between schools and the food industry. In Tallinn, one of the Shape Up schools initiated and organised a regional quiz on healthy life styles in cooperation with local authorities.

In Krimulda, a number of regular workshops were organised with nutritionists and other health experts from the local community. In Hull, a consultation dinner was organised in partnership with the local authorities; on this occasion, pupils prepared the meal together with local chefs, and both parents and pupils were consulted on local issues.

Even though this last action was a one-off event and not a permanent change in determinants, it could be seen as a good example of new forms of partnership and pupils' influence. Finally, the data summarised in Table 8 also demonstrates that many of the participating cities established some form of cooperation concerning healthy eating with **parents** and incorporated this in regular schoolwork.

Some schools, for instance in Maastricht, Mataró and Pecs, brought about new school policies (e.g. banning bringing sweets to school, and setting up a breakfast club and a "fruit day" with parents).

In addition, one of the Shape Up schools in Mataró introduced a change in the award scheme and started offering fruit as a prize for competitions.

Other schools, for example in Monza, Mataró and Hull, organised workshops, seminars and other forms of expert advice on healthy eating for parents on a regular basis with a view to raising awareness and encouraging them to prepare healthy packed lunches for their children to bring to school.

Determinants of physical activity at school, local and family level

The project documentation shows that a number of determinants of physical activity at different levels were addressed over the course of Shape Up, and positive changes were brought about in terms of making healthy choices easy.

An active lifestyle is not only a matter of individual behaviour, especially for children and young people, but also, and more importantly, a matter of access, availability, safety, attractiveness and time, among other things. Therefore, influencing these determinants and involving children and young people in the process is invaluable in terms of promoting regular physical activity.

As summarised in Table 8, a number of changes were initiated in this respect. The data show that, in nearly all of the participating cities, there was a clear increase in the number, attractiveness and variety of opportunities for physical activity provided at school and in the environment surrounding the school.

The actions and changes brought about through Shape Up are diverse. Some of the changes attempted to provide new, interesting and stimulating experiences through body movement for the pupils in order to increase their skills, motivation and commitment to incorporate regular physical activity in their lives.

In some cases, this was done through initiating changes in the content of physical education classes (involving experts from the local community or introducing new forms of activity) while, in other cases, the changes were on a school level, or in cooperation with the local community (new championships, new sports, active break times, etc).

The common denominator for this category of actions and changes is increased variety of **teaching and learning strategies**, including experimental, participatory and action-oriented learning. Examples representative of this category include the following: one of the Shape Up schools in Ballerup established a “body experimentarium”, a regular activity workshop during which pupils experimented with body movement through traditional games and plays, songs and singing.

In Krimulda, the Shape Up school established a “day in the nature” as a part of the schoolwork with a view to broadening the scope of the pupils’ database of ideas and skills concerning an active lifestyle. In Mataró, new activity games (korfbal and tambori) were introduced on a regular basis (twice a week during the break time), supported with training and competition schemes.

In Monza, swimming and mini-volleyball classes were offered during school hours, and orienteering training was offered to interested pupils. In Pecs, new sports training and tournaments were established as a part of the schoolwork in addition to PE lessons, e.g. floor-ball, karate, judo, tennis and aerobics.

Some of the training was organised in cooperation with the local community and involved both pupils and teachers (badminton and ice-skating). In Perpignan, one of the Shape Up schools introduced classes in African dance.

In Hull, girls-only football sessions were established to encourage female pupils to be more physically active. Similarly, as documented on the portal, in Jönköping, ice hockey (bandy) for girls was introduced. In Vienna, a new sport was also introduced at the school (rocket-ball). In Brno, new classroom body movement sessions were established that could be done during each lesson (e.g. yoga, limbering up, etc.).

All these new possibilities improved the offer of the Shape Up schools concerning physical activity. The fact that pupils were actively involved in suggesting and, in some cases, organising the new structures together with adults ensured their sense of ownership, engagement and motivation.

Another category of actions and changes to influence determinants of physical activity relates to bringing about changes in the **physical environment of the school** or the **neighbouring community**, with a view to increasing the possibilities for physical activity. In some cases, this meant introducing new school policies conducive to physical activity.

For example, in Mataró, a **school policy** was established to give free tickets to the ice rink as awards for different competitions organised at the school. In Poznan, a dance/music/movement policy was established to ensure active use of the school break times.

Also in Poznan, a ‘two-wheel league’ was established to encourage pupils to cycle to school. In Krimulda, the school revisited the issue of the weight of the school bag and brought about changes to make it be easier for the pupils to walk to school.

Other examples in the same category include initiating health-promoting changes in the school playgrounds or in the community activity facilities, sometimes in cooperation with the local authorities and with active pupil participation.

For instance, as presented in Table 7, in Brno, a climbing wall was built in one of the school hallways, accompanied by training for pupils and teachers, as well as wall climbing tournaments.

In Barreiro, pupils, guided by the teachers and the Shape Up staff, prepared a request with a plan for the extension of the playground and submitted it to the city council.

In Bonn, the school received external funding as a result of Shape Up and rehabilitated the school playground with a Viking ship that inspired pupils to create a set of new games for its use. Also in Bonn, a youth fitness club was established at the school and the community fitness facilities were made available for pupils to use.

In Poznan and Monza, a bicycle park and bicycle workshop were built to encourage pupils to cycle to school. In Maastricht, the speed of the traffic around the school was reduced in order to make it safer for pupils to walk in the school vicinity.

Also in Maastricht, the pupils made a detailed proposal to the city council for a new playground in a disadvantaged community near the school; the proposal was approved by the alderman. In Hull, an activity park was established using old rubber tyres.

The third category of actions and changes to influence the determinants of physical activity concerns increased **cooperation with parents and local stakeholders**. Most of the Shape Up schools established a regular “walking bus” to school in cooperation with the parents.

In Monza, the Shape Up schools took an active part in the community initiative for sustainable mobility at the city level. In Mataró, the schools cooperated with the municipality to create itineraries with new, conceptual walking tours in the city and the surrounding woods. Parents and children were encouraged to take walks together on a regular basis.

New partnerships were established in Perpignan, for example with the city council, with a view to improving safety, accessibility and mobility possibilities in the community. In Hull, partnerships were established with the city council to improve existing and establish new green areas and playgrounds around schools.

In Ballerup, a team of Shape Up pupils was involved in the municipal board for planning the new sports hall in the municipality. In Barreiro, children and grandparents marched together in the city to lobby for an active lifestyle.

In addition to improving conditions at the schools and in the community for physical activity, the cooperation between schools, the community, parents and extended families contributed to raising parental awareness and motivation to further support, develop and sustain a more active lifestyle for children.

Local coordinators' and facilitators' assessment of Shape Up

In this section, we present and discuss the findings of the questionnaire administered to the Shape Up local facilitators (LF) and local coordinators (LC). The aim of the questionnaire was to gain an insight into their perspectives, experience, and assessment concerning:

- a** Shape Up outcomes in terms of pupils' learning, knowledge about health, and health-related action competence;
- b** The usefulness of the Shape Up approach in terms of pupil participation, the IVAC pedagogy and school-community collaboration
- c** The general level of satisfaction with Shape Up and suggestions for further development

Individual learning outcomes

First, we present the findings regarding pupils' learning and competence development related to health issues. Highlights from the questionnaire include LF and LC perceptions concerning:

- Pupils' knowledge and action competence in relation to health issues
- Pupils' habits concerning healthy eating and physical activity

The responses concerning learning about health issues (Table 9) point to the perceived effectiveness of Shape Up in terms of learning outcomes. An overwhelming 92% of respondents stated that pupils gained new knowledge about health issues.

Answer	Numbers
Increased	24 (92%)
The same	1 (4%)
Decreased	0 (0%)
Don't know	1 (4%)
Total	26 (100%)

Table 9: Would you say that pupils have increased their knowledge about health? N=26

Answer	Numbers
Increased	20 (77%)
The same	3 (12%)
Decreased	0 (0%)
Don't know	3 (12%)
Total	26 (100%)

Table 10: In your opinion, have pupils changed their learning capacity as a result of their participation in the Shape Up project? N=26

Similarly, Table 10 presents the question concerning the development of pupils' capacity to learn. The findings show that 77% of respondents stated that pupils increased their learning capacities due to their participation in Shape Up.

Only 12% of respondents reported that there were no changes in pupils' capacity to learn and 12% responded that they did not know whether pupils had developed their capacity to learn.

One of the intended individual outcomes of Shape Up was pupils' action competence, that is, their ability to bring about health-promoting changes in determinants of healthy eating and physical activity.

The findings presented in Tables 11 and 12 show that the LFs' and LCs' assessment was that Shape Up was effective in fostering pupils' abilities to act upon health at school and community levels.

As shown in the tables below, 85% of respondents stated that pupils' ability to take health-promoting actions at school had increased as a result of Shape Up, and 69% stated that the pupils' ability to act in the local community had increased.

Answer	Numbers
Increased	22 (85%)
The same	3 (12%)
Decreased	0 (0%)
Don't know	1 (4%)
Total	26 (100%)

Table 11: Would you say that pupils have experienced a change in their ability to act upon health at school? N=26

Answer	Numbers
Increased	18 (69%)
The same	6 (23%)
Decreased	0 (0%)
Don't know	2 (8%)
Total	26 (100%)

Table 12: Would you say that pupils have experienced a change in their ability to act upon health in the community? N=26

Tables 13 and 14 below present the perceptions of the Shape Up LFs and LCs concerning changes in pupils' habits and behaviours related to healthy eating and physical activity. According to the LFs and LCs, pupils did change their behaviour in terms of healthier eating and regular physical activity as a result of their involvement in Shape Up.

As shown in the tables, 69% of respondents stated that pupils' eating habits had improved, and 85% stated that pupils' physical activity patterns had improved.

Answer	Numbers
Improved	18 (69%)
The same	5 (19%)
Worsened	0 (0%)
Don't know	3 (12%)
Total	26 (100%)

Table 13: In your opinion, have pupils changed their eating habits as a result of participation in the Shape Up project? N=26

Answer	Numbers
Improved	22 (85%)
The same	2 (8%)
Worsened	0 (0%)
Don't know	2 (8%)
Total	26 (100%)

Table 14: In your opinion, have pupils changed their physical exercise habits as a result of participation in the Shape Up project? N=26

Thus, these findings from the questionnaire demonstrate that, according to the Shape Up local facilitators and coordinators, the project had a powerful impact on pupils' learning and capacity to learn, their health-related knowledge and action competence, and their behaviour related to healthy eating and physical activity.

Even though measured indirectly, through the individual perspectives and assessments of the LCs and LFs, the consistent trends in these findings are an important indicator of the effectiveness of Shape Up concerning individual behaviour outcomes of Shape Up.

The Shape Up approach

As mentioned earlier, the main dimensions of the Shape Up approach include: pupil participation, the IVAC model and school-community collaboration. The Shape Up approach has been the subject of much discussions and reflection at international and local training sessions, regional meetings and the meetings for all among the local coordinators and local facilitators.

In particular, the idea of involving children and young people in authentic actions to influence and improve the conditions for their health as part of their learning was considered a challenge in many countries.

However, the questionnaire findings demonstrate that the challenges were met successfully, and the main dimensions of the Shape Up approach were implemented efficiently and perceived as useful by the majority of local facilitators and local coordinators.

In the following, we discuss the responses to selected questions with a view to highlighting these findings.

Pupil participation

Genuine participation of pupils and their influence over the process and the content of Shape Up is one of the central elements of the Shape Up approach. The responses related to the question of pupils' involvement point to the clear opinion of the LFs and LCs that Shape Up has been successful in involving pupils in genuine, active and authentic ways.

This resulted in increased motivation and a sense of ownership among the pupils in their work with health issues. Table 15 shows that, in the LFs' and LCs' views, pupils were highly involved in Shape Up: 65% of respondents stated that pupils were very much involved, while 35% stated that pupils were somewhat involved.

Answer	Numbers
Pupils were very much involved	17 (65%)
Pupils were somewhat involved	9 (35%)
Pupils were only involved a bit	0 (0%)
Pupils were not involved at all	0 (0%)
Total	26 (100%)

Table 15: In general, how would you characterise pupils' involvement in the Shape Up project and activities? (Please choose one option) N=26

Table 16: In your opinion, who has been deciding the most in the Shape Up project/who has had the greater influence? N=27

Theme/topic	Numbers
The Local Coordinator	4 (15%)
A local Shape Up group facilitator	6 (22%)
Another member of the Shape Up team	0 (0%)
An individual teacher	0 (0%)
Teachers in general	3 (11%)
Pupils	10 (37%)
Parents/community members	0 (0%)
The head teacher	2 (7%)
Other school staff	0 (0%)
The school chairman/the committee	0 (0%)
Sponsors/local businesses	0 (0%)
External experts (nutritionists, etc.)	0 (0%)
Other	1 (4%)
Don't know	1 (4%)
Total	27 (100%)

Moreover, on the question concerning the influence in the decisions made during the course of Shape Up (Table 16), 37% of respondents stated that pupils had the most influence in the decisions made, along with local facilitators (22%) and local coordinators (15%).

These are powerful findings, particularly given the fact that the respondents were asked to choose only one option. Furthermore, 11% of respondents stated that teachers had also had an influence on the decisions and 7% stated that the school head teacher had had an influence.

Thus, according to the opinions of the LFs and LCs, the Shape Up approach was effective in involving pupils as active partners to work with issues related to healthy eating and physical activity.

Moreover, pupils were not only actively involved in the project, but they also had substantial influence over the decisions concerning the project content and process.

Participation was interpreted as pupils' influence on the project content, that is, action and change ideas. Pupils were involved in different ways and forms, depending on the stage in the project development and the issue at hand.

IVAC pedagogical model

Another key aspect of the Shape Up approach was the Investigation-Vision-Action-Change (IVAC) pedagogical model. The project documentation discussed earlier in this report showed that pupils were guided by the adults to *investigate* the conditions related to healthy eating and physical activity at school and local community level; they developed creative alternative *solutions* to a number of problems identified in their investigations, and they took specific actions to bring about health-promoting *changes* in these conditions.

The opinions about the IVAC model stated by the LFs and LCs in the questionnaire show that they found it valuable and useful for structuring pupil participation and guiding pupils to systematically explore health determinants and initiate changes.

As Tables 17 and 18 below demonstrate, all the LCs and LFs who responded to the questionnaire stated that they had found the IVAC approach useful (52% found it excellent and 48% found it useful) and would recommend it to a colleague (77% definitely, and 23% most likely).

Answer	Numbers
Excellent	13 (52%)
Useful	12 (48%)
Slightly useful	0 (0%)
Not useful	0 (0%)
Total	25 (100%)

Table 17: Generally speaking, how useful did you find the IVAC (Investigation - Vision - Action - Change) approach? N=25

Answer	Numbers
Yes, definitely	20 (77%)
Most likely	6 (23%)
Most unlikely	0 (0%)
No, definitely not	0 (0%)
Total	26 (100%)

Table 18: Would you recommend the IVAC (Investigation - Vision - Action - Change) approach to a colleague? N=26

It is evident from these responses that the IVAC model was perceived as a valuable pedagogical tool, conducive to action-oriented learning and the development of action competence. It also provided a practical framework to structure the joint project work of pupils and adults and cooperation with the local community.

Following the different phases in the IVAC model in dynamic ways, the project used the whole school, as well as the local community setting as an extended classroom, to enable pupils to learn about healthy eating and physical activity in authentic ways linked to their everyday lives.

School-community collaboration

The third dimension of the Shape Up approach is school-community collaboration. The key assumption of this dimension is that it would be naïve and unlikely to expect children and young people to play a leading role in changing health-related determinants.

It is not the responsibility of children and young people to improve the conditions related to health on their own; they need guidance and support from competent and committed adults.

By doing this together with the adults, children and young people gain invaluable knowledge, competence and experience, which in turn influence their health behaviour and motivation to deal with healthy eating and physical activity in their everyday lives.

A few questions in the questionnaire dealt with the perspectives and experience of the LFs and LCs concerning the issue of collaboration in the broader sense, including collaboration within the school, collaboration with parents, and collaboration with the wider local community.

The questions about **collaboration within the school** address the perceptions of the LFs and LCs regarding the involvement of the school community (e.g. the head teacher, management, health staff and the school board) in the project.

As shown in Table 19, 85% of respondents (N=26) stated that Shape Up was successful in involving the school community. The 22 respondents who answered positively to the question about the involvement of the school community were asked in a following question how fruitful they found the collaboration (Table 20).

As shown in the table, 41% of the 22 respondents found the collaboration very fruitful, while 46% found it somewhat fruitful. Only 14% found the collaboration not very fruitful.

Answer	Numbers
Yes	22 (85%)
No	4 (15%)
Total	26 (100%)

Table 19: Has the school community (school leaders, other personnel, school board, etc.)/school staff been involved in the Shape Up activities at the school? N=26

Answer	Numbers
Very fruitful	9 (41%)
Somewhat fruitful	10 (46%)
Not very fruitful	3 (14%)
Total	22 (100%)

Table 20: In your opinion, how was the collaboration/involvement of the school/school staff? N=22

The responses to the question about **collaboration with parents** are presented in Tables 21 and 22. All the LCs and LFs stated that parents had been involved (Table 21), and 48% found the collaboration with parents very fruitful while 40% reported that it was somewhat fruitful.

Only 12% did not find the collaboration with parents fruitful (Table 22). These findings indicate that parents found Shape Up beneficial for their children's health and were motivated to devote time and energy to be involved in it.

Answer	Numbers
Yes	25 (100%)
No	0 (0%)
Total	25 (100%)

Table 21: Have parents/families been involved in the Shape Up activities? N=25

Answer	Numbers
Very fruitful	12 (48%)
Somewhat fruitful	10 (40%)
Not very fruitful	3 (12%)
Total	25 (100%)

Table 22: In your opinion, how would you characterise the collaboration/involvement of parents? N=25

The issue of **collaboration with the community** was addressed through two sets of questions. The first set of questions aims to highlight collaboration with the community in general (local community organisations, shops around the school, NGOs, the police, etc.). The second set of questions addresses the involvement of the municipality and city council in particular.

Table 23 shows that 73% of respondents report that Shape Up was successful in involving and collaborating with different organisations in the local community. Out of these, 53% found the collaboration very fruitful, while 32% found it somewhat fruitful.

A few respondents (15%) did not find the collaboration fruitful (Table 24). Nevertheless, the overall conclusion is that most of the local coordinators and local facilitators deemed the collaboration with the community successful and useful.

Answer	Numbers
Yes	19 (73%)
No	7 (27%)
Total	26 (100%)

Table 23: Has the community around the school been involved in the Shape Up activities at the school? N=26

Answer	Numbers
Very fruitful	10 (53%)
Somewhat fruitful	6 (32%)
Not very fruitful	3 (15%)
Total	19 (100%)

Table 24: In your opinion, the collaboration/involvement of the community around the school has been: N=19

Similarly, reports of **collaboration with the municipality/city council** are positive. The project activities included professionals such as architects, technicians, city planners and representatives from local village boards.

As shown in Table 25, 85% of respondents reported that the city council was involved in Shape Up activities and 15% that it was not involved. Of the respondents who reported involvement, 59% found the collaboration very fruitful, while 41% found it somewhat fruitful. None of the respondents stated that the collaboration was not useful (Table 26).

Answer	Numbers
Yes	22 (85%)
No	4 (15%)
Total	26 (100%)

Table 25: Has the municipality/city council been involved in the Shape Up activities at the school? N=26

Answer	Numbers
Very fruitful	13 (59%)
Somewhat fruitful	9 (41%)
Not very fruitful	0 (0%)
Total	22 (100%)

Table 26: In your opinion, the collaboration/involvement of the municipality/city hall has been: N=22

In summary, the dominant perception of the LFs and LCs of collaboration with the community seems to be positive. In the view of the LFs and LCs, school-community collaboration overall was successful and deemed helpful in terms of meeting the main Shape Up objective of influencing the determinants of healthy eating and physical activity at school, family and local community level.

Positive notion of health

An additional important aspect of Shape Up, as mentioned earlier, is the holistic and positive notion of health. This is not a specific element of the approach, but rather a fundamental basis for the whole approach.

Therefore, we have included in this section the opinions of the LFs and LCs about whether Shape Up succeeded in employing the broad and positive health concept in the project work.⁹ As presented in Table 27, all the respondents agreed that Shape Up was successful in employing the positive concept of health.

Answer	Numbers
Positive health issues (mental health, relationships, etc.)	27 (100%)
Negative health issues (medicine, obesity, disease, etc.)	0 (0%)
Total	27 (100%)

Table 27: In your opinion, the themes, topics and activities in which your class/school/city has been involved focused mainly on: N=27

Overall assessment of the Shape Up project by LFs and LCs

Finally, with a view to gaining an insight into their overall assessment of the project, the LFs and LCs were asked to look back at Shape Up and point out the best aspects of their experience with the project by selecting and ranking three possible options.

Table 28 demonstrates that the LFs and LCs stated that the best thing about Shape Up was that it improved children’s learning. This option scores best with respect to the total number of responses (28%) and it is also the option that obtained the best score when we look at selections of first priorities. Eighteen (66%) of the respondents reported children’s learning as their top priority.

In contrast, option number 2 (getting to know other people and places) was selected as a first choice by four (14%) respondents.

Table 28: What is the best thing about working/having worked in the Shape Up project? (Select three answers: Insert “1” as your first choice, “2” as your second choice, and “3” as your third choice. You may only select three). N=74 (number of responses)

Answer	1. priority	2. priority	3. priority	Total
High prestige & status	0	0	0	0 (0%)
Shape Up project provides extra income	0	0	0	0 (0%)
Get to work with/know other people and places	4	6	7	17 (23%)
The Shape Up activities make sense/promote learning for children	18	2	1	21 (28%)
Communication/planning in the Shape Up project is good	1	1	4	6 (8%)
Personally I learn more/the Shape Up project is interesting and stimulating	1	12	7	20 (27%)
Get freedom to plan my work	0	0	0	0 (0%)
Get influence/can decide	1	0	2	3 (4%)
Get to work with/know many different people at my school	0	1	0	1 (1%)
Supportive parents/community	0	3	0	3 (4%)
Get to travel/work outside the school/is a good break in my normal job	0	0	0	0 (0%)
Makes my working life more convenient	0	0	1	1 (1%)
Is a possibility for promotion/career	0	0	0	0 (0%)
Other	1	0	0	1 (1%)
Don't know	0	0	1	1 (1%)
Total	26	25	23	74 (100%)

⁹ In the methodological framework, this was reflected in the terminology suggested for use in the work with the pupils. Instead of “nutrition”, the suggested focus was on “food” and “meals”; instead of “physical activity” or “exercise”, references were made to “body movement”, “dance” and “play”.

It is also noteworthy that option number 6 (the Shape Up project is interesting and stimulating) was selected in 27% of responses and is thereby the second most frequently mentioned option, indicating that the professional development offered by Shape Up was considered as an important part of the project.

In contrast, the options about career promotion, extra income and travel possibilities were not selected by any of the respondents.

Finally, the two tables below (Tables 29 and 30) show the responses concerning reported satisfaction and LFs' and LCs' opinions of the general effectiveness of Shape Up.

Answer	Numbers
Very satisfied	19 (70%)
Somewhat satisfied	7 (26%)
Not very satisfied	1 (3%)
Very unsatisfied, not satisfied at all	0
Total	27 (100%)

Table 29: In general, were you satisfied by working on the Shape Up project? N=27

Answer	Numbers
Very successful	15 (58%)
Somewhat successful	11 (42%)
Not very successful	0 (0%)
Don't know	0 (0%)
Total	26 (100%)

Table 30: Please indicate how successful you feel the Shape Up project has been in general. N=26

Table 29 deals with satisfaction with the project on a more personal level. The responses demonstrate that 70% of the LCs and LFs were very satisfied, 26% were somewhat satisfied, and 3% were not very satisfied.

These findings are backed up by the responses presented in Table 30, in which 58% of respondents stated that, in general, the Shape Up project was very successful. The remaining 42% stated that it had been somewhat successful.

With a view to gaining an insight into the LFs' and LCs' suggestions and recommendations for improving the project in the future, they were also asked if there were elements of the Shape Up project that they would have liked to change.

The options, from which it was possible to choose a maximum of three, included the approach and the support structures (such as financial resources, better communication with external partners and the social climate among staff involved).

The responses show that LCs and LFs suggested improvements relating primarily to the support structures of Shape Up. Two of the most important suggestions stated in their responses relate to more economic resources and better communication with politicians. These two options were selected by 41% of respondents, as shown in Table 31.

This clearly points to a need for more substantial involvement of decision-makers at local level in planning how to support and sustain the Shape Up project. The other options selected in the respondents' ranking included: better communication with parents/the community and more training of staff.

The latter illustrates the need for in-service training in place when a new health-promotion and prevention approach is introduced.

In conclusion, the highlights from the questionnaire demonstrate that, according to the opinions of the local

Theme/topic	Numbers
The subjects and topics chosen	0 (0%)
The methods and ways young people work	1 (4%)
Better access to resources/more economic resources	11 (41%)
More human resources/more staff	3 (11%)
More training of staff	7 (26%)
The social climate among staff and the Shape Up team	3 (11%)
Structure of the Shape Up project/Shape Up team	3 (11%)
Better communication with other Shape Up team members	6 (22%)
The social climate at the schools	2 (7%)
Better communication with pupils	2 (7%)
Better communication with parents/community	7 (26%)
Better communication with local politicians	11 (41%)
Better communication with administrators	1 (4%)
I wouldn't want to change anything	2 (7%)
Other	1 (4%)
Don't know	0 (0%)
Total	60 (100%)

Table 31: If you could choose three things to change in the Shape Up project, what would you like to change? You may select a maximum of three. N=60 (number of selections)

facilitators and local coordinators, Shape Up was a success. The project as a whole was perceived as successful and satisfactory, the methodological approach (participation, IVAC and school-community collaboration) was found valuable and useful, and there was a clear perception that the positive approach to healthy eating and physical activity had been successfully employed.

The few critical remarks reported by the local facilitators and coordinators point to the need to improve the supporting structures and resources in order to fully utilise the potential of the Shape Up project in the future.

Lessons learnt and recommendations

To sum up briefly, based on the evidence collated and summarised in this report, the Shape Up approach resulted in the desired outcomes of influencing health determinants and developing pupils' action competence.

It should be reiterated that the conclusions and recommendations discussed in this section are based mainly on the summary of the project documentation, including the annual reports and contents on the Web portal. This documentation is supplemented with the findings from the questionnaire given to local facilitators and coordinators which gave a different slant on the project outcomes by summarising their personal experience and their assessment of the effectiveness of Shape Up based on their experience.

Shape Up demonstrated that children and young people can be guided to successfully bring about health-promoting changes in a number of health-related determinants at school and community level. Changes in these determinants resulted in, for example, healthier food consumption at school, new forms of physical activity, and increased interest, motivation and ability among children and young people to deal with health issues.

More specifically, Shape Up has proven to be effective in initiating and bringing about health-promoting changes in the following determinants related to healthy eating and physical activity:

- **School level**
 - School health policies
 - School environment, facilities and food offer (more opportunities for healthy eating and physical activity)
 - Educational strategies and contents in health education and physical education classes
- **Community level**
 - Physical environment, facilities and food offer in the community surrounding the schools (more opportunities for healthy eating and physical activity)
- **Partnerships**
 - Sustainable partnerships between schools, municipalities, city councils and other local stakeholders in the area of prevention and health promotion
 - Focused cooperation with parents and extended families to encourage and sustain healthier choices
- **Individual level**
 - Children's and young people's sense of ownership, motivation and empowerment in terms of dealing with the issues of healthy eating and physical activity in their own lives and in their surroundings
 - Parental awareness and motivation related to dealing with the issues of healthy eating and physical activity in their family lives and in their surroundings

Pupils' individual behaviour and habits concerning healthy eating and physical activity. Even though this was not the focus of Shape Up, the LFs and LCs indicated that the work on Shape Up positively influenced pupils' health-related behaviour

In relation to the last point, it is important to emphasise that the summary shows that the Shape Up approach, characterised by the mechanisms of pupil participation, IVAC-pedagogical design, and school-community collaboration, has the potential to be effective in involving pupils in and enabling them to address obesogenic environments on a school and local community level.

The main assumption on which the Shape Up project has been built is that ensuring sustainable changes in determinants is essential for any prevention or health promotion initiative aimed at encouraging healthy lifestyles among children and young people.

The health-promoting changes in the conditions at school and in the local community, and the effective related partnerships between schools, parents and the community are conducive to developing and sustaining healthy lifestyles, because they:

- a** Help make healthy choices easy choices;
- b** Support individual healthy choices on a continuous and long-term basis.

The changes in pupils' sense of ownership, motivation and empowerment are conducive to developing and sustaining healthy lifestyles because they help develop pupils' action competence, that is, their ability to deal with health-related issues.

Grounded in critical health education and health promotion theory and practice (Wallerstein, 1993; Jensen, 1995; Tones and Tilford, 2001; Simovska and Jensen, 2003; Tones, 2005; Simovska 2007), the fundamental idea of Shape Up is that, through these processes, children and young people develop multidimensional knowledge and skills related to healthy eating and physical activity, as well as increased interest in dedicating time and energy to working on genuine health-related problems.

Accordingly, over a longer term, the health-related knowledge, competence, empowerment and motivation are conducive to taking better care of one's own health, that is, to developing and sustaining an individual healthy lifestyle.

Last but not least, the participatory processes and the establishment of new partnerships involved in influencing the determinants following the Shape Up approach, and particularly the new forms of pupils' influence, contribute to fostering children's and young people's democratic/citizenship skills and competence, and also to the development of school- and community-based social capital in relation to health.

Recommendations

Our overall conclusion is that the Shape Up framework, characterised by the IVAC educational model, pupil participation, and school-community collaboration as key dimensions, succeeded in initiating and bringing about positive changes in the determinants of healthy eating and physical activity on a school and local community level.

The number, scope, nature and sustainability perspective of the initiated changes suggest that schools do have the capacity, and should be involved as invaluable partners rather than approached as easy means of reaching children and inculcating predetermined healthy behaviours in order to prevent childhood overweight and obesity and promote health.

At the same time, the project points to a number of preconditions that are necessary for the implementation of similar projects in the future.

Therefore, in the following, we first propose a number of suggestions concerning the implementation of preventive and health-promoting interventions aimed at actively involving schools, children and young people. We categorise these suggestions in three groups: (a) schools, (b) community, and (c) mutual cooperation between schools and community partners.

We then provide more comprehensive recommendations for decision-makers working in the area of prevention of childhood overweight and obesity and promoting health through schools.

Successful implementation of interventions

The key lessons learnt from Shape Up in terms of the **preconditions concerning schools and the community and mutual cooperation for successful project implementation** include:

School

- Make formal contracts with schools.
- Ensure ownership by school management with a view to implementing and sustaining the intervention.
- Provide efficient teacher training, professional development and continuous support from the start of an intervention. Professional development needs to be linked to everyday practice and must involve participatory and action-oriented strategies.
- Involve schools actively in planning the intervention from the outset so that the intervention is incorporated into the school curriculum.
- Ensure synergies rather than symbolic links among similar existing interventions in order to avoid parallels.
- Ensure a methodological framework for the intervention that which is clear and easy to follow and, at the same time, flexible and adjustable to teachers' needs and priorities. In other words, provide an adequate balance between an open structure on the one hand and fixed step-by-step guidance on the other.
- Ensure resources for teacher engagement, including time allocated in their everyday workload.

Community

- Establish close links between schools and the local community and ensure professional as well as political support for project implementation.
- Ensure ownership among local stakeholders.
- Ensure that the local stakeholders are fully aware of the purpose and details of the funding allocation.
- Build up shared understanding with stakeholders concerning the intervention through joint workshops, meetings and events to share experiences.
- Ensure cooperation with parents as a resource in the local community.
- Involve children and young people in identifying and cooperating with the stakeholders from the community.

School-community collaboration

- Ensure a mutual collaborative forum (e.g. LPG in Shape Up).
- Clarify roles and responsibilities of each partner from the outset.
- Support teachers to prepare children and young people well to work with local stakeholders.
- Ensure preparation of local stakeholders to work with children and young people.
- Provide regular communication between schools and local partners to ensure shared aims, joint planning and implementation.

Effective prevention of childhood overweight and obesity

On a more wide-ranging level, the lessons learnt from Shape Up and recommendations for **decision-makers in the area of prevention of overweight and obesity and promotion of health** of children and young people include:

- Combine preventive interventions to prevent childhood overweight and obesity with educational approaches that are participatory and action-oriented and combined with settings-based health promotion.
- Integrate the criteria of the whole school approach to health promotion and health education (European Network of Health Promoting Schools and Schools for Health in Europe) in initiatives to prevent childhood overweight and obesity.
- Focus on determinants of health on a school and local community level rather than solely on individual lifestyle and behavioural change.
- Involve the target group, including children and young people, in planning an intervention and in influencing determinants on different levels.
- Carefully prepare the entry of the project in schools, including analysis of the specific contexts involved, needs and priorities, curriculum analysis and recommending places in the curriculum into which the prevention initiatives could be incorporated.
- Ensure project organisation that allows for direct training and capacity development of teachers and other adults expected to work with children and young people. Strategies to competently guide and involve children and young people in substantial rather than trivial ways should be central to the capacity building at a school and community level.
- Ensure support structures for prevention initiatives linking schools, parents, and a number of sectors in municipalities and city councils. An inter-sectorial coordinating team for the initiative should form part of this structure, with representatives from different departments in the municipality, city council, schools and key stakeholders from the local community.
- Ensure meaningful resources for the involvement of all of the staff involved in the intervention, including teachers and school staff. Public-private partnerships can be useful as long as clear ethical codes are agreed upon among all involved partners.
- Involve all stakeholders in evaluation of the process as well as the outcomes; the evaluation should be planned from the beginning of an intervention. The success criteria and related indicators should be agreed upon from the outset, and children and young people should be consulted when defining the success criteria and indicators.
- Build on research and evaluation strategies that are formative and empowering rather than controlling, with a view to ensuring ownership and the engagement of the target group, as well as learning from experience.
- Provide longer-term support for complex multifaceted interventions to ensure effectiveness and sustainability.

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APPENDIX 1

Template for the initial project Shape Up report

The Shape Up team is interested to find out the areas of the project that are working well in the cities and the areas that are proving to be the most challenging. The information you give will be used to support further training at the Shape Up meeting in February, and to celebrate and share the successes of the Shape Up cities. Please could you let us know how you think things are going so far?

Please describe the things that you feel you have done well on the Shape Up project so far....

(Please think about this in a broad sense. Examples might include the way you have used the portal, things you have done with the schools/classes, training teachers in the IVAC approach, your project planning, partnership working, community involvement etc.)

Please describe some of the things that you have found difficult to achieve on the Shape Up project so far....

(Again, please think broadly about the kinds of challenges that you have encountered. Examples might include difficulties with the portal, difficulty in getting support from the teachers, local capacity issues, things you have done with the schools/classes, training teachers in the IVAC approach, your project planning, partnership working, community involvement etc.)

Please describe any aspect of your experiences in implementing Shape Up at the local level, which you feel others could learn from. (We acknowledge that we are still at an early stage in the project, but please consider for example, what advice would you give to new cities, what would you do differently if you were starting again? Etc)

APPENDIX 2

Templates for the 2007 and 2008 Shape Up project reports

The report follows the same template we used for the project planning. Please describe in rich details what happened in the project and add your reflections and suggestions based on the experience so far. We encourage you to describe both good and less good examples, reflect on barriers as well as potentials, and on lessons learnt from both. The Report is structured in the following two sections.

- I. Organisational framework for action (Local Promoting Group, roles, strategies, responsibilities...)
- II. Content framework for action (School-community work including pupil participation and Investigation, Vision, Action Change structure)

You can choose the order of descriptions yourself – you may decide to describe the school-based processes first and then the organizational ones. The space given in the template is just for orientation, you can use as many pages as you need. The richer the descriptions, the larger our common Shape Up “bank” of experience.

DEADLINE: 26 January 2007

I Organisational Issues

(September 2006 – February 2007)

1. Establish Local Promoting Group (LPG) and hold an official “Kick off meeting (KOM)”
Please describe the project developments up till now for establishment of the LPG and for the initial tasks, roles and responsibilities of the LPG. Describe both successes and failures; give advice to the new cities to start with Shape Up:
2. Develop a strategy for communicating the progress of SU school based projects to the local community
Please describe what you did to communicate Shape Up developments locally (and eventually internationally). Describe both successes and failures, Describe both successes and failures; give advice to the new cities to start with Shape Up:
3. Develop a strategy for how to make sure the LPG will help you in involving children and young people
Please describe what happened in the collaboration between LPG and children and young people in the Shape Up school work following IVAC model. Describe both successes and failures; give advice to the new cities to start with Shape Up.

II Content Issues

(September 2006 – February 2007)

Overall project topic: eating and body movement

1. Training of teachers
Please describe what happened in the training of teachers and school staff involved in Shape Up:
2. Selection
Please describe what happened in the phase of Selection of the content-focus of Shape Up school-based work:
3. Investigation
Please describe what happened in the Investigation phase of Shape Up school-based work:
4. Vision
Please describe what happened in the Vision phase of Shape Up school-based work:
5. Critical reflection (self-evaluation)
Please describe what was done concerning self-evaluation and documentation of Shape Up school-based work

Project Report

January 2007 – December 2007

The report follows the same template we used for the project planning. Please describe in rich details what happened in the project and add your reflections and suggestions based on the experience so far. We encourage you to describe both good and less good examples, reflect on barriers as well as potentials, and on lessons learnt from both. The Report is structured in the following two sections.

- III. **Organisational** framework for action (Local Promoting Group, roles, strategies, responsibilities...)
- IV. **Content** framework for action (School-community work including pupil participation and Investigation, Vision, Action Change structure)

You can choose the order of descriptions yourself – you may decide to describe the school-based processes first and then the organizational ones. The space given in the template is just for orientation, you can use as many pages as you need. The richer the descriptions, the larger our common Shape Up “bank” of experience.

Thank you for your collaboration

DEADLINE: 20 February 2008

I Organisational Issues

(January 2007 – December 2007)

1. Local Promoting Group (LPG): tasks, roles and meetings.
 - Please describe the tasks and activities developed by the LPG. Describe both successes and failures.
 - Please list the meetings held by the LPG (participants/main point on agenda).
 - LPG composition (new members, members that left the LPG and new collaborating institutions).
 - Strategy developed by the LPG to involve children and young: Please describe what happened in the collaboration between LPG and children and young people in the Shape Up school work following IVAC model. Describe both successes and failures.
2. Communication/Dissemination
 - Please describe what you did to communicate Shape Up developments locally (and eventually internationally). Describe both successes and failures.
 - Media coverage of SU activities. Please add copies of press articles.

II Content Issues

(January 2007 – December 2007)

Overall project topic: eating and body movement

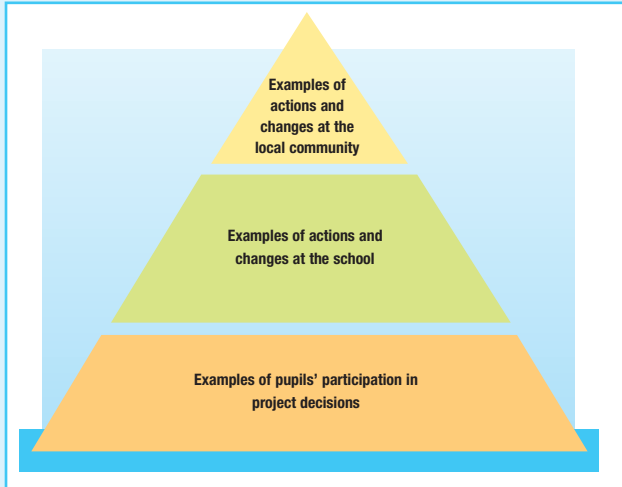
1. Teachers involvement

Please describe what happened in the training activities of teachers and school staff involved in Shape Up. How did you support them? Describe their involvement in the project. Describe both successes and failures.

2. Action/change*

Please describe what happened in the phase of action/change of the content-focus of Shape Up school-based work.

* Second year cities: Please describe what happened in the phase of Selection/Investigation phase of Shape Up school-based work.



Note: you can use the same information from the poster used in the Regional meeting, adding a more detailed explanation.

3. Other activities, international collaboration and SU-weeks.

- Please describe other activities developed by the Shape Up schools.
- Cross-cultural collaboration: status and plans. Where you are? Are you using the portal as a tool for the international collaboration?
- SU-Weeks: summary of the actions/activities held in the SU-Weeks. Please, add additional material from the SU-Weeks if you have it.

4. Difficulties

Please describe the difficulties/barriers you faced in this second year. Which strategies did you use to overcome it? Where would you need additional support?

5. Critical reflection (self-evaluation)

Please describe what was done concerning self-evaluation and documentation of Shape Up school-based work.

6. Figures

	TOTAL	Registered on the portal
Number of participating schools		
Number of participating classes		
Number of teachers involved		
Number of students involved		
Number of LPG members involved		

APPENDIX 3

Research classification/categorisation of Data on the Shape Up-portal

Example for Austria

COUNTRY/ SCHOOL (NUMBER OF PARTICIPAT- ING CLASSES; PARTICIPATING CLASSES)	MAIN TOPIC (TOPICS & THEMES: MAIN PARTICIPAT- ING CLASSES; PARTY) ¹	INVESTIGATION/PROJECT ACTIVITY ²	VISION ³	ACTION/CHANGE & ACTION PLAN	ACTORS INVOLVED (ACTORS/INVOLVE- MENT OF CHILDREN) ⁴	CRITICAL REFLEC- TION/ EVALUATION ⁵	COLLABORA- TION ⁶
AUSTRIA/ VOLKSS- CHULE LAVANT- GASSE (1; 4A)	<ul style="list-style-type: none"> Class 4A; Obesity Reasons for getting fat. 	<p>"Reasons for getting fat":</p> <ul style="list-style-type: none"> Children group-worked on class basis about rea-sons for "why we get fat". Children drew and pro-duced collages, which illustrated reasons for why people become obese. 	<ul style="list-style-type: none"> The vision of healthy food targets "every- body in the communi- ty as well as the school" (Quotation: Local facilitator). So far the SU- visions have been implemented at a local school commu- nity level. (Source: Local facilitator). 	<ul style="list-style-type: none"> N/A⁷ 	<ul style="list-style-type: none"> Children, teachers. 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> N/A
	<ul style="list-style-type: none"> All pupils; "Healthy schmacks" and "healthy food". Nutrition top- ics. 	<p>Shape-Up-week May 2007:</p> <ul style="list-style-type: none"> Group work on production of wall charts: Pupils pro- duced wall charts in groups with text and photos from magazines and journals picturing healthy food, and put them into different collages, which were exhibited for other pupils at the school. Lecture by nutritionists: The SU-week started with a lecture by two Nutritionists. Both parents and pupils attended the session. The lesson contained practical exercises with drawing of "food triangle" on the floor and exhibiting of different kinds of food and their nutritional values. "Working stations" with different activities: Pupils prepared a game/"questionnaire race" at the school with different working stations. The other pupils at the school were to pass through those 17 "working/explo- ration stations", where information about SU-themes such as body movement, food, nutrition, water etc., was exhibited. The working stations contained games, plays and exercises/questions for the pupils, and dur- ing the "health race", pupils had to sing, play and investigate/answer different questions about health. Distribution of SU sports bags. Children received sports bag from the SU project. Pupils wrote articles about the SU-project. Pupils wrote articles about the he Shape Up project to the school newspaper. It is mainly pupils, who write in the newspaper. In this way the whole school community, 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> Action plan: The school got used to the idea of "healthy schmack" and will implement it in the school next year. (Source: SU prom. group member). Action outputs: Pupils organ- ised a "Shape-Up-day for the whole school, where the follow- ing activities were carried out: - With the help of teachers and parents produced an investigation "play" with 17 stations for other pupils to pass through, while they explored general SU-themes. Different "home-made" plays and toys were produced, as part of the 17 stations. The stations should illustrate food items (i.e. "hole digestive circuite" (sic)). While other pupils were passing through the 17 stations, they had to sing different songs about healthy issues ("banana phone karaoke") and prepare healthy schmacks for the other pupils. - During the SU-day for the whole school, the pupils had organised a nutritionist to come 	<ul style="list-style-type: none"> SU-class (Class 4). All classes, teachers and parents. Local media (came to school). District school inspec- tor visited school during SU-day. Presentation of SU Europe Project in gener- al at the biggest Educational Fair in Austria called "Interpädagogica 2006", in order to cre- ate awareness at all levels from school to community and political level. Pupils/teachers. According to local facilitator, pupils them- selves chose themes and topics on all 3 Austrian schools. Acc. to Local facilita- tor, training/investiga- tion sessions were 	<ul style="list-style-type: none"> Acc. to school/facili- tator: "The school got used to the idea of healthy schmack, and will implement it in the school next year". (Local school facili- tator) "Our investiga- tion apart has come to an end, and we are very proud of our work" (Source: Teacher). Pupils and teachers partici- pated in an active way and ask the two nutritionists' questions that had brought up during the investigations. (Source: Teacher). Pupils and teachers feel very proud to present 	<ul style="list-style-type: none"> N/A

<p>i.e. all parents, teachers, school inspectors, pupils etc. could be informed about the project and be presented in the school newspaper. (Source: Teacher).</p>	<ul style="list-style-type: none"> ■ Investigation of food. ■ Pupils from class 4A investigated together with nutritionists different food items, discussed nutritional value and made paper collages etc. The exercise was very practical organised, where pupils among other could see and touch different stable food products, such as pasta, bread, wheat, flour, corn flakes etc. and discuss the differences between them. ■ Pupils drew a "food pyramid" on the floor in a school corridor, and attached names and pictures of different kinds of food in it in order to illustrate nutritional value. ■ Pupils answered a questionnaire, which the teacher had prepared, in groups. Some of the questions concerned from where different food items steam (meat from animals for instance). (Source: Teacher/analyses of photo series). 	<ul style="list-style-type: none"> ■ Vision was to investigate food and nutritional value. (Analyses) 	<p>and lecture the whole school about healthy food. (Analyses).</p> <ul style="list-style-type: none"> ■ The action plan for the next edition of the school newspaper (March 2007) is to explain, what pupils have been doing and what they plan to do within their action plan. (Source: Teacher). 	<p>initiated by pupils, following an example from an adult (for instance nutritionist). Nutritionist served as a supporter during children's investigation.</p> <ul style="list-style-type: none"> ■ Children in class 4A. ■ Nutritionists. ■ Teachers. 	<p>the SU project. (Source: Teacher).</p> <ul style="list-style-type: none"> ■ "Great session. This session was very good to conclude our Investigation Phase within the SU project." (Quotation: Teacher). 	<ul style="list-style-type: none"> ■ N/A
<p>Class 4A: <ul style="list-style-type: none"> ■ Nutrition. ■ Healthy food. ■ Food pyramid. ■ Food items – grain, flour, pasta, bread, other flour products, meat. </p>	<p>SU-Week-June 2007: <ul style="list-style-type: none"> ■ Investigation of sugar content in soft drinks: Pupils investigated the amount of sugar in soft drinks, and exhibited examples of how much sugar content was in soft drinks. Sugar cubes were put into empty bottles and exhibited on tables together with critical questions on paper charts, asking other pupils if they would consume this/such an amount of sugar. ■ Body Mass Index Measures: All pupils, who wished to, could participate in a Body Mass Index (BMI) measurement, where their BMI was measured by a nutritionist and evaluated. ■ Production area for healthy food/"Healthy Buffet": Teachers/pupils arranged a "production area" for healthy snacks, where pupils together in groups prepared healthy snacks. ■ Sport party: pupils arranged and conducted a "sport party" for all pupils and teachers at the school, where different athletic activities took place. ■ Info stand about healthy food: Information stand done by students about SU-themes, where pupils would answer other pupils' questions about health in general. ■ Exhibition of "healthy food"-theme: Students pro- </p>	<p>The main vision in the SU-week was: "What can we do in the whole school to make the whole school community aware of that the school buffet only sells unhealthy food and there are soft drinks everywhere machines with coke, soft drinks and nothing healthy?" The vision was to call the attention of the school with various activities. (Source/Quotation: SU prom. Group member).</p>	<p>Changes in the school: <ul style="list-style-type: none"> - "Good ones": Pupils bought less at the school cafeteria, asked for fruit, which eventually was on the menu but didn't sell. - "Bad ones": Cafeteria started massive advertisement for hot dogs, pizza, candyfloss etc. Further, paid advertisements on the school video screen appeared and pupils' free advertisement disappeared from the same screens. More vending machines for soft drinks were installed. - The direction of the school admitted that they should change something in the cafeteria and are looking for a way of solving this problem. (Source: SU prom. group member). <p>Conclusion: The work will go</p> </p>	<p>Pupils/students and teachers. <ul style="list-style-type: none"> ■ Nutritionist expert. ■ Presentation of SU Europe Project in general at the biggest Educational Fair in Austria called "Interpädagogica 2006" in order to create awareness at all levels from school to community and political level. ■ According to Local facilitator, pupils themselves chose themes and topics on all 3 Austrian schools. ■ Acc. to Local facilitator, training sessions were initiated by pupils, following an example from an adult (for </p>	<ul style="list-style-type: none"> ■ N/A 	
<p>All classes: <ul style="list-style-type: none"> ■ What can be done to raise awareness in the school community". ■ Healthy drinking, i.e. how to avoid sugar for instance in Coca-cola, Fanta and other soft drinks. ■ Appropriate body weight. ■ Healthy snacks. ■ "Sport party". </p>	<p>More awareness is created in the school community about structural issues; influencing pupils' possibilities for acting. For instance school direction admitted that something should be changed in the cafeteria. (Source: SU prom. group member).</p>	<p>More awareness is created in the school community about structural issues; influencing pupils' possibilities for acting. For instance school direction admitted that something should be changed in the cafeteria. (Source: SU prom. group member).</p>	<p>More awareness is created in the school community about structural issues; influencing pupils' possibilities for acting. For instance school direction admitted that something should be changed in the cafeteria. (Source: SU prom. group member).</p>	<p>More awareness is created in the school community about structural issues; influencing pupils' possibilities for acting. For instance school direction admitted that something should be changed in the cafeteria. (Source: SU prom. group member).</p>	<p>More awareness is created in the school community about structural issues; influencing pupils' possibilities for acting. For instance school direction admitted that something should be changed in the cafeteria. (Source: SU prom. group member).</p>	<p>More awareness is created in the school community about structural issues; influencing pupils' possibilities for acting. For instance school direction admitted that something should be changed in the cafeteria. (Source: SU prom. group member).</p>



<p>duced paper collages with photos and drawings, cut out from 4-colored magazines and journals and made wall charts and collages of these, which pictured unhealthy food (cakes, sweets soft drinks etc.)</p> <ul style="list-style-type: none"> ■ Pupils' reports on the SU-portal: All pupils from class 2C made an individual report on the SU-portal, where they exhibited their work (paper collages, etc.) 	<p>Class report from pupils in class 2C:</p> <ul style="list-style-type: none"> ● Expectations for SU-project 	<p>Class report of opinion/expectations: (Class 2C):</p> <ul style="list-style-type: none"> ■ Class 2C from the Secondary School Franklinstrasse in Vienna made personal reports about their expectation to the SU-projects and attached a photograph of the whole class. "We are boys and girls around 11-12 years old and our school participates in the Shape Up project. We expect to have a great time!" (Source: Chief Editor, pupils). ■ Several other pupils from the school made individual reports about their experiences and opinions about the SU-project – all positive. 	<p>on next year in order to achieve more. (Source: SU prom. group member).</p>	<p>instance nutritionist). Nutritionist served as a supporter during children's investigation.</p>	<p>■ N/A</p>
<p>AUSTRIA/ VOLKSSCHULE ADOLF LOOS (2: PSC, 1A)</p>	<ul style="list-style-type: none"> ■ TV-team/pupils in pre-school classes/class1: ■ SU-project in Austria. 	<p>■ N/A</p>	<p>■ Camera team from "Austrian Television Programme "HELP TV" was in the school and filmed the nutritionist sessions in the Pre-school class and class 1, which will be broadcasted March 14, 2007 at National Austrian Television (ORF).</p>	<p>■ HELP TV-team, National television ORF: ■ Children from class 1 and pre-school classes.</p>	<p>■ National broadcast of SU-activities in the school and awareness rising at a national level about SU-project.</p>
<p>Pre-school classes (mainly): Physical exercise. Alimentation in general (from a nutritionist's perspective). Technology of food, for instance grain, bread, technology of the process of bread baking etc. "Healthy diners". Organoleptic values and qualities of different food products.</p>	<p>Shape-Up week May 2007:</p> <ul style="list-style-type: none"> ■ Pre-school classes performed a play every morning during the SU-week for the school community. ■ Mask production: Pupils produced masks to wear in the rhythmic/play sessions. ■ Exhibition at the entrance of the school of SU-themes for passers from the local area. Pupils investigated the themes through preparing posters, which was made into an exhibition at the school's entrance. ■ Rhythmic sessions, where pupils were singing. ■ Food cooking experimentation sessions. Pupils investigated food and cooking procedures through baking bread. The processes of bread baking were explored and bread balls were baked by home-grained flour. Pupils investigated the process of baking bread and the different bread components, while they were grading the flour themselves, mixing with water and watching the processes of dough preparation (i.e. the structure of the dough, components of dough, volume, size, taste and smell). ■ Blindfolding of food products. Pupils were "blindfolding" 	<p>■ Would like to produce more awareness in the school community. (Source: SU prom. group member).</p>	<p>■ More awareness in the school community is produced; this work would have to go on in order to achieve real change. (Source: SU prom. group member).</p> <p>■ Establishment of a "healthy lunch buffet" done by parents and pupils in co-operation on a monthly basis (initiated by parents). The healthy food buffet was also done in connection to the SU-week.</p>	<p>■ Children, parents (prepared schmacks for all pupils together with pupils). ■ Nutritionists. ■ Community members, who by-passed during the SU-week the school (and who watched pupils' exhibition). ■ Newspaper article in local Vienna newspaper "Grätzel Nord" about the SU-week in AL-interpädagogica school, distributed to 960.000 households in Vienna area. ■ International media. ■ Acc. to local facilities, all training/investi-</p>	<p>■ N/A</p>



<ul style="list-style-type: none"> ■ Food cookery sessions. ■ Rhythmic sessions. ■ According to Local facilitator, pupils themselves chose themes and topics on all 3 Austrian schools. 	<p>different food products. Without being able to see the food items, they investigated form, size, smell etc. and guessed/distinguished the product.</p> <ul style="list-style-type: none"> ■ Drawings of children and healthy food. Some pupils from the younger classes made drawings of stories of children, who experienced healthy food ("healthy dinner") in diverse settings. The stories were homemade, and the children presented them to other children. One story was the following: "Max wants to have action. His mother doesn't like it. So he sails to an island, where the wild things are. At last he's tired, and he has a warm and healthy dinner at home." (Pupil, about 7 years old). ■ "Healthy schmack" production – parents and children. Parents prepared "healthy schmacks" for the whole school on a food buffet), and were assisted by their children. (Source: Teacher). ■ Nutritionist lecture. A nutritionist made a lecture about how alimentation and physical exercise can influence learning (for parents only). ■ Free play in the school garden. Pupils played in the school garden. (NA) ■ Physical exercise. Pupils did physical exercise in the school garden. (NA) ■ Cleaning in the school garden. Pupils cleaned the "Biotope" in the school garden. ■ SU-bags. Distribution of SU-bags to pupils. <p>(Source: SU prom. group member/teachers/Local facilitator)</p>	<p>gation sessions were initiated by pupils, following an example from an adult (for instance nutritionist). Nutritionist served as a supporter during children's investigation.</p>	<ul style="list-style-type: none"> ■ Children, teachers. ■ Food company (external sponsor). 	<ul style="list-style-type: none"> ■ N/A 	<ul style="list-style-type: none"> ■ The vision was to teach children to distinguish between healthy and unhealthy food. (Analyses). 	<ul style="list-style-type: none"> ■ Healthy and unhealthy schmacks. (September and October 06): ■ The teachers prepared several healthy snacks, which the children consumed. ■ A company advertising healthy food sponsored schools with € 70 for preparing healthy snacks. ■ November 06 ■ "Our New Classmate". The children got pictures of little girls and boys with big bellies from the teachers. They investigated the issue of healthy versus unhealthy food by each day drawing food items and schmacks into the stomach of the girls and boys on the pictures. When a week was gone, pupils and teachers together watched the drawings in a circle and discussed where there was healthy and unhealthy food. Then teacher put a new classmate with a big belly on the board. Pupils located snacks in advertising pictures and attached them to the drawn "belly". Some of the proclamations were: "My goodness! What a lot of unhealthy food was in there!". (Source: Teacher)
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This category "Main topic/participating party" states the main actors involved or for whom, the activity/event mainly involves/targets. General SU-activities/ SU-week activities are listed under this category. In the category "vision" is listed the source of information, from where info/data stem such as for instance: Pupils/classes, parents, teacher, headmaster/school head teacher, Shape Up-Promoting Group Member (SU prom. group member), Shape Up promoting Group Coordinator (SU prom. Group coord.), different sources of medias such as newspapers, television etc. Source of vision listed where information is available. Degree of children's participation/other actors' participation listed, where data are accessible. List of other actors apart from pupils/students, teachers and academical/subjectical health professionals involved in a school's SU-activities. This category "Critical reflection/Evaluation" contains wider information than only critical reflection, for instance opinions, understandings and other evaluations from pupils, teachers, SU-personnel and school community about the specific activities and events. Opinions and understanding will be listed where data is available. *Collaboration covers cross-cultural, national, community-collaboration, and other forms of collaboration/co-operation where actors from in- and outside the school are involved in a shared project. N/A: Not applicable, data not available.

APPENDIX 4

Questionnaire for Local Coordinators and Facilitators – 2008

Ray Lorenzo

Summary

About working in the Shape Up project...

1) What is the best thing about working/having worked in the Shape Up project? (Select three answers: Insert "1" as your first choice, "2" as your second choice, and "3" at your third choice. You can only select three!)

- High prestige & status (1)
- Shape Up project is an extra income (2)
- Get to work with/ know other people and places (3)
- The Shape Up activities make sense/promote learning for children (4)
- Communication/planning in the Shape Up project is good (5)
- Personally I learn more/Shape Up project is interesting and stimulating (6)
- Get freedom to plan my work (7)
- Get influence/can decide (8)
- Get to work with/know many different people at my school (9)
- Supportive parents/community (10)
- Get to travel/work outside the school/is a good break in my normal job (11)
- Makes my working life more convenient (12)
- Is a possibility for promotion/career (13)
- Other (14)
- Do not know (15)

2) In general, have you been satisfied with working in the Shape Up project? (Only one X)

- Very satisfied (1)
- Sometimes satisfied (2)
- Not very satisfied (3)
- Very unsatisfied, not satisfied at all (4)

Comments:

About your work in the Shape Up project.....

3) In your opinion, who is/has been deciding the most in the Shape Up project/ who has the greater influence? (Only one X)

- The local Shape Up promoting coordinator (1)
- A local Shape Up group facilitator (2)
- Another member of the Shape Up team (3)
- An individual teacher (4)
- Teachers in general (5)
- Pupils (6)
- Parents/community members (7)
- The head teacher (8)
- Other school staff (9)
- The school chairman/the committee (10)



- Sponsors/local business life (11)
- External experts (for instance nutritionists, work out trainers etc.) (12)
- Other (13)
- If other, write here who: _____
- Do not know (14)

4) If you could choose three things to change in the Shape Up project, what would you like to change? (You can only select three or less):

- The subjects and topics chosen (1)
- The methods and ways pupils/students work with the topics and subjects (2)
- Better access to resources/more economic resources (3)
- More human resources/more staffs (4)
- More training of staffs (5)
- The social/psychological climate between teachers/members of the Shape Up team (6)
- Structure of the Shape Up Project/Shape Up team (7)
- Better communication with other Shape up team members (8)
- The social/psychological climate at the school (9)
- Better communication with pupils (10)
- Better communication with parents/the community (11)
- Better communication with local politicians (12)
- Better communication with administrators in the Shape Up project (13)
- I do not want to change anything (14)
- Other (15)
- If other, write here what: _____
- Do not know (16)

About themes and topics in the Shape Up project ...

5) Which of the following themes and topics have been part of the Shape Up activity/activities in your city/school(s)/class(es): (One or more X):

- Body movement and physical exercise (i.e. fitness, bicycling, swimming, sailing, ball games etc.) (1)
- Extreme sports and athletics (i.e. wall climbing, mountain biking, triathlon, competitive racing) (2)
- Body knowledge/awareness and body functions (i.e. calorie burning, energy consumption, metabolism) (3)
- Healthy/unhealthy food and drinks (incl. eating habits, snacks/sweets, school food, school canteen) (4)
- Nutrition (i.e. nourishment, vitamins and minerals, foods, food pyramid etc.) (5)
- Obesity and body weight (6)
- Food items and products, food technology, recipes (7)
- Food aesthetics, taste, smell, "food favourites" (8)
- Sleeping, sleeping habits (9)
- Sickness, disease (10)
- Hygiene and body care (i.e. hygiene, hair and skin care, intoxicants etc.) (11)
- Oral hygiene, dental hygiene (12)
- Medicine and medicine use (13)
- Alcohol, cigarettes and smoking (14)
- Other drugs and drug addictions (i.e. cannabis/marihuana, "pills", pharmaceuticals etc.) (15)
- Sex (16)



- Traffic and traffic safety (17)
- Bullying (18)
- Family/friends/friendship/teenage life (19)
- Leisure time/leisure time activities (20)
- School community/community around the school (21)
- Other social themes (i.e. good interaction, relation to others in general etc.) (22)
- Psychological themes and feelings (i.e. mental health, "feeling good", "joy and fun", stress etc.) (23)
- Cognitive skills and abilities (i.e. memory skills, "mind maps", cognitive competencies) (24)
- Nature and environment (i.e. school yard/school garden, forest, plants, wildlife, nature experiences, etc.) (25)
- Shape Up project/group/portal in general (training/meeting/workshop/information) (26)
- Politics, health regulations etc. (27)
- Other (28)

If other, write here what: _____

6) In your opinion, themes, topics and activities, that you/your class/school/city has been involved in, mainly had a focus on ... (Only one X):

- "Positive" health issues (for instance good mental health, feelings, relations, happiness, sex, etc.) (1)
- "Negative health issues" (for instance sickness and disease, "how to cure", medicine, obesity, drug abuse, etc.) (2)

About parents' involvement & collaboration ...

7) Have parents/families been involved in the Shape Up activities? (Only one X):

- Yes (1) → go to question 28
- No (2) → go to question 31

8) In your opinion, how would you characterise the collaboration/involvement of parents: (Only one X)

- Very fruitful (1) → go to question 29
- Some fruitful (2) → go to question 29
- Not very fruitful (3) → go to question 30

About the involvement & collaboration of the school community and school staff ...

9) Has the school community (school leaders, other personnel, school board etc.)/school staff been in-volved in the Shape Up activities at the school? (Only one X):

- Yes (1) → go to question 47
- No (2) → go to question 51

10) If yes, to what degree has the school/school staff been involved: (Only one X):

- The school/school staff has been very much involved 1)
- The school/school staff has been some involved (2)
- The school/school staff has been only little involved 3)

11) In your opinion, the collaboration/involvement of the school/school staff has been: (Only one X):

- Very fruitful (1) → go to question 49
- Some fruitful (2) → go to question 49
- Not very fruitful (3) → go to question 50



About the involvement & collaboration of the community around the school...

12) Has the community around the school been involved in the Shape Up activities at the school? (Only one X):

- Yes (1) → go to question 37
 No (2) → go to question 41

13) If yes, to what degree has the community around the school been involved: (Only one X):

- The community has been very much involved (1)
 The community has been some involved (2)
 The community has been only little involved (3)

14) In your opinion, the collaboration/involvement of the community around the school has been: (Only one X):

- Very fruitful (1) → go to question 39
 Some fruitful (2) → go to question 39
 Not very fruitful (3) → go to question 40

About the involvement & collaboration of the municipality & city hall ...

15) Has the municipality/city hall been involved in the Shape Up activities at the school? (Only one X):

- Yes (1) → go to question 42
 No (2) → go to question 46

16) In your opinion, the collaboration/involvement of the municipality/city hall has been: (Only one X):

- Very fruitful (1) → go to question 44
 Some fruitful (2) → go to question 44
 Not very fruitful (3) → go to question 45

In general about the Shape Up project – involvement, engagement, learning ...

17) In general, how would you characterise pupils' involvement in the Shape Up project and activities? (Only one X):

- Pupils were involved very much (1)
 Pupils were involved some (2)
 Pupils were only involved a bit (3)
 Pupils were not involved at all (4)
 Don't know (5)

18) In your opinion, have pupils changed their learning capacities as a result of their participation in the Shape Up project? (Only one X):

- Increased (1) The same (2) Decreased (3) Don't know (4)

19) Would you say that pupils have increased their knowledge about health?

- Increased (1) The same (2) Decreased (3) Don't know (4)

20) Would you say that pupils have experienced a change in their ability to act upon health at school?

- Increased (1) The same (2) Decreased (3) Don't know (4)



21) Would you say that pupils have experienced a change in their ability to act upon health in their community

Increased (1) The same (2) Decreased (3) Don't know (4)

22) In your opinion, have pupils changed their eating habits as a result of participation in the Shape Up project

Increased (1) The same (2) Decreased (3) Don't know (4)

23) In your opinion have pupils changed their physical exercise habits as a result of participation in the Shape Up project

Increased (1) The same (2) Decreased (3) Don't know (4)

24) Generally speaking, how useful did you find the IVAC approach: (Only one X):

Excellent (1)

Useful (2)

Slightly useful (3)

Not useful (4)

25) Would you recommend the IVAC approach to a colleague? (Only one X):

Yes, definitely (1)

More likely (2)

More unlikely (3)

Not, definitely not (4)

26) Please indicate how successful you feel, the Shape Up project has been in general: (Only one X):

Shape Up project has been very successful (1)

Shape Up project has been some successful (2)

Shape Up project has not been very successful (3)

Don't know (5)

Shape Up is the largest three-year project dealing with the determinants of child obesity at the community level. Children and adults in 20 Member States are taking actions together. Shape Up makes European cities the key protagonists of effective and efficient public health actions. Shape Up contributes to all cities, schools and local actors' efforts to address the issue of growing up healthily at school and from school.

Shape Up Cities

Athens (Greece) - Ballerup (Denmark) - Barreiro (Portugal) Bonn (Germany)
Brno (Czech Republic) - Hull (United Kingdom) - Jönköping (Sweden) - Krimulda (Latvia) - Maastricht (Netherlands)
Malta - Mataró (Spain) - Monza (Italy) - Nicosia/Lakatamia (Cyprus) - Pécs (Hungary) - Perpignan (France)
Poznan (Poland) - Tallinn (Estonia) - Turku (Finland) - Vienna (Austria)

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www.shapeupeurope.net