

Increasing fruit and water consumption at Primrose Hill Primary School March-July 2015

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Published February 19, 2016

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Key Points

- KS2 survey showed only 3% of pupils ate fruit and 53% drank water at morning break
- To increase healthy eating, Camden Health Improvement Team supported the School Council to become Mini Health Champions

Purpose

What were your reasons for doing this development work?

Obesity prevention is a priority area for Camden Council with 22% of pupils overweight or obese in reception and 34% in Year 6 (2013-2014). Pooled data over a three year period (2011/12 – 2013/14), showed Primrose Hill Primary School's overweight and obesity levels in Year 6 were higher than the Camden average. There is a strong positive association between childhood and adult obesity according to a 2015 systematic review and meta-analysis. A National Health Service report (2008) outlined children who are overweight are twice as likely to become an overweight adult compared to healthy weight children, the risk is even higher for overweight or obese young people. Thus, it is particularly important for children to develop healthy eating habits early in life.

Primrose Hill Primary School had previously had success working with the Health Improvement Team to improve the nutritional standard of packed lunches. To continue improving healthy eating habits among pupils, Primrose Hill Primary School decided to run the MHC programme on healthy eating to support the school council to be healthy eating advocates.

The pre evaluation survey for the programme, a one day diet record survey, completed by Key Stage 2 pupils found that only 3% of pupils consumed fruit and 53% consumed water at morning break. Furthermore, only 64% of Year 6 pupils that responded to the Health Related Behaviour Questionnaire (2015) stated that they ate fruit 'on most days' or 'every day' in the week. For good health pupils should be eating at least one portion on fruit in the school day. According to the report 'The link between pupil health and wellbeing and attainment' by Public Health England (2014), three studies found positive associations between pupils eating healthy foods regularly throughout the school day and higher attainment levels.

Water and milk are the best choices for hydration and to strengthen children's teeth. A recent report on Carbohydrates and Health (2015) by the Scientific Advisory Committee on Nutrition, recommends that no more than 5% of total dietary energy should come from free sugars, which are found in 100% fruit juice, fruit juice containing less than 100% fruit and other sweetened drinks. Many children are

currently consuming on average, three times the recommended amount of free sugars, which can contribute to tooth decay and weight gain.

According to the 2015 Health Related Behaviour Questionnaire completed by Year 6 pupils at Primrose Hill Primary School 24% of boys and 15% girls responded that they drank fizzy drinks 'on most days' or 'every day' in the week before. Furthermore, 24% responded that they had fillings on their last visit to the dentist.

Who were the identified target learners?

The school council was chosen to be trained as MHC to deliver healthy eating messages to their peers in Key Stages 1 and 2.

What were your success criteria?

An increase in the percentage of pupils eating fruit and drinking water at morning break.

What did you do? (What success criteria did you use?)

- The MHC training session used individual activities, group work and problem solving to teach the school council about healthy eating and to plan strategies to create behaviour change.
- The MHC programme used a peer lead approach to create a shift in pupils' knowledge, attitudes and behaviours.
- To evaluate the impact of the MHC programme Key Stage 2 pupils completed a one day diet record survey pre (213), in the middle of the programme (41) and at 16 weeks post (211).

What specific teaching resources did you use?

Outcomes and Impact

What has been the impact on pupil learning and teaching?

Evidence of impact on pupil learning and teaching/leadership

Fruit consumption at morning break:

- 3% pre
- 66% mid
- 31% post

Water consumption at morning break:

- 53% pre
- 73% mid
- 62% post