

### 2.2.2 The Netherlands

The second example of good practice is the Netherlands where a bottom-up approach is used based on the Dutch health promoting school approach. People being overweight or obese are important public health issues in the Netherlands. The Ministry of Health has identified obesity as a priority public health issue and as a result it is considered within the national public health policy. However there is no central policy under which schools are working.

With the Dutch health promoting school approach schools can determine their own priorities and develop their own school health policy. The approach was introduced in 2005 (24) and outlines how schools can be supported regionally towards becoming a health promoting school. This approach is based upon the regional 'SchoolBeat' approach which states that health promoting activities should be integrated into schools, activities of all involved agencies should be coordinated, a whole school approach should be used, and then a win-win situation for both health promotion and education should be possible (25). The process for introducing and implementing health promotion in schools is described in the six 'SchoolBeat' steps. They are as follows:

1. Determine the health needs of the school.
2. Set health promotion priorities.
3. Determine activities and strategies.
4. Write the school health plan.
5. Realise the school health plan.
6. Evaluate.

Central to the Dutch health promoting school approach is that the entire school population should actively participate in the health promoting school and that the work involved in this is shared between relevant agencies. Schools can commission programs or activities that meet their identified needs. Alternatively, there are health promoting organisations and public health services who develop programmes or activities to deliver in schools. So, schools can identify the most obvious and important issues they need to address and then choose programmes or materials that aim to deal with them. As a result of this process there are now many programmes aiming to target the problem of overweight and obese children and young people which focus on healthy eating and physical activity. The Dutch approach aims not only to improve pupils' healthy eating and physical activity but also to create a healthy

and safe environment for all members of the school community; pupils and staff alike. (25).

The Dutch health promoting school model, which is based on the American Coordinated School Health Program Model (26), plays a central role in the health promoting school approach. In the Netherlands both primary and secondary schools work with this model (25). The health promoting school model described is a mix of different strategies and approaches leading to an integrated school health policy and is used when prioritising activities and programmes. The health promoting school model is made up of eight components and when three or more of these components are used together this increases the effectiveness of the model. The eight components are: health education, physical activity, food policy, healthy and safe school environment, participation of parents and community, psychological and social-emotional guidance and counselling, provision of care, and workplace health promotion.

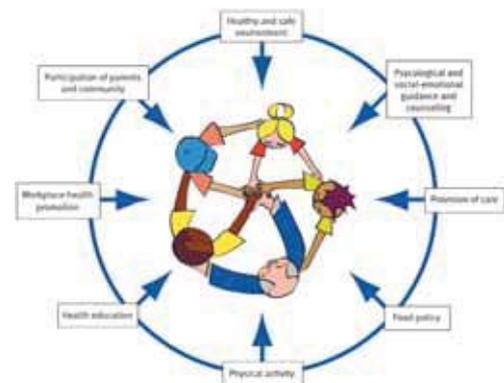


Figure 1. The Dutch health promoting school model based on the coordinated school health programme model (27)

Regarding the promotion of healthy eating and physical activity, schools can choose strategies from more than one component to achieve the desired outcome. Schools can for example improve the choice of food in the school canteens (food policy) and increase the exercise time during physical activity lessons (sport and exercise) as well as informing parents about the importance of healthy eating and physical activity (participation of parents) in working towards decreasing the number of overweight children and young people (25). This model has been used to structure the HEPS guidelines described in chapter three.

### 2.2.3 Belgium

The third example of good practice is the Flemish speaking part of Belgium with a focus on healthy eating in schools. In this part of Belgium 2400 primary schools and 800 secondary schools offer a cooked meal to children and young people everyday (27). A lot of information about healthy eating and drinking can be given to children and young people through health education, the food offered by the school and by the modelling of healthy behaviour by teachers.

In autumn 2006, the project ‘Healthy Eating at School’ was comprised of 28 high-quality Flemish initiatives and projects aimed at promoting healthy menus in school (27). A network was created including head teachers, staff from the Student Support Centre network, healthcare professionals, school cooks and other involved people. This network organized study visits to catering companies, mass caterers and schools. All parties tried to include more healthy products in the deliveries (school meals and bread boxes) and projects were set up such as a school fruit project. Thanks to this project, schools make use of ‘The Active Food Triangle’ to work towards daily, balanced eating and sufficient physical activity. This triangle includes nutritious and healthy staples throughout the day such as water, potatoes, grains, fruit and vegetables, meat, fish, eggs and dairy products. The report ‘Healthy eating at school Good practice guide for balanced nutrition at school’ recommends which products are suitable for a ten day school meal timetable. Recommendations for balanced drinking and snacks are also given along with practical suggestions (27).

### 2.2.4 Scotland

The fourth example of good practice is Scotland. The Scottish government wants to improve the diet of children and young people because it is proven that the diets of many children and young people in Scotland fall short of national dietary recommendations. Many are consuming inadequate amounts of fruit and vegetables and eating too many foods high in fat, saturated fat, salt and sugar (28).

The ‘eatwell plate’ has been developed for children and shows the types and proportions of foods needed to make up a well-balanced, healthy diet.

School meals have undergone a transformation due to the ‘Hungry for Success’ initiative. The Schools (Health Promotion and Nutrition) Act 2007 builds on ‘Hungry

for Success’ and requires local authorities and managers of grant-aided schools to ensure that food and drink provided in schools comply with the nutritional requirements specified by Scottish ministers in regulations. The Act also makes health promotion a central purpose of schooling. In Scotland a guide has been developed for the implementation of nutritional requirements for food and drink in schools. This guidance describes standards for school lunches as well as food and drink standards for food and drink served out-with the school lunch (28).

Besides the guidance for healthy eating, Scotland has guidance for improving physical activity, in children and young people as well as in adults (29). In the Physical Activity Task Force, established following the recommendations of the White Paper ‘Towards a Healthier Scotland’, evidence is provided about the scale and consequences of physical inactivity. In addition, recommendations are given on how to support physical activity in children, and adults. The Task Force aims to create a healthier Scotland by encouraging Scots to become more active. Successful approaches are long term, involve many sectors and agencies, and are best aimed at preventing inactivity. The challenge in Scotland is to provide a combined effort across a wide range of policies: transport, education, social justice, health, housing and economic regeneration. To support this challenge, Scotland already has appointed a national physical activity coordinator who has developed Active Primary Schools and School Sport Development Officers. The Physical Activity Task Force has made some new targets to be achieved by the year 2022 (29).

The four examples of good practice (Wales, the Netherlands, Belgium and Scotland) include a good number of initiatives, projects and programmes that were developed to promote healthy eating and/or physical activity in children and young people. The examples demonstrate the importance for a national comprehensive school policy for healthy eating and physical activity based on the health promoting school approach. ■